

# Bristol Tennessee Housing and Redevelopment Authority TN066V02 PHA Plans

5 Year Plan for Fiscal Years 2008 - 2012  
Annual Plan for Fiscal Year 2008

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN  
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan  
Agency Identification**

**PHA Name:** Bristol Tennessee Housing and Redevelopment Authority

**PHA Number:** TN066

**PHA Fiscal Year Beginning: (mm/yyyy)** 10/2008

**Public Access to Information**

**Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply)**

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices

**Display Locations For PHA Plans and Supporting Documents**

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices
- ☐ Main administrative office of the local government
- ☐ Main administrative office of the County government
- ☐ Main administrative office of the State government
- ☐ Public library
- ☐ PHA website
- ☒ Other (list below)

Fort Shelby Tower

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

**5-YEAR PLAN**  
**PHA FISCAL YEARS 2008 - 2012**  
[24 CFR Part 903.5]

**A. Mission**

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

- ☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
- ☒ The PHA's mission is: (state mission here)

The mission of the Bristol Tennessee Housing and Redevelopment Authority is to provide affordable, decent, safe and sanitary housing or housing assistance with quality environments and opportunities to low-income people of Bristol, Tennessee.

**B. Goals**

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

**HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.**

- ☒ PHA Goal: Expand the supply of assisted housing  
Objectives:
- ☒ Apply for additional rental vouchers:
  - ☒ Reduce public housing vacancies:
  - ☒ Leverage private or other public funds to create additional housing opportunities:
  - ☒ Acquire or build units or developments
  - ☐ Other (list below)
- ☒ PHA Goal: Improve the quality of assisted housing  
Objectives:
- ☐ Improve public housing management: (PHAS score) 91%
  - ☒ Improve voucher management: (SEMAP score) 105%

- ☒ Increase customer satisfaction:
  - ☒ Concentrate on efforts to improve specific management functions:  
(list; e.g., public housing finance; voucher unit inspections)
  - ☒ Renovate or modernize public housing units:
  - ☐ Demolish or dispose of obsolete public housing:
  - ☐ Provide replacement public housing:
  - ☐ Provide replacement vouchers:
  - ☐ Other: (list below)
- ☒ PHA Goal: Increase assisted housing choices
- Objectives:
- ☒ Provide voucher mobility counseling:
  - ☒ Conduct outreach efforts to potential voucher landlords
  - ☐ Increase voucher payment standards
  - ☒ Implement voucher homeownership program:
  - ☐ Implement public housing or other homeownership programs:
  - ☐ Implement public housing site-based waiting lists:
  - ☐ Convert public housing to vouchers:
  - ☐ Other: (list below)

**HUD Strategic Goal: Improve community quality of life and economic vitality**

- ☒ PHA Goal: Provide an improved living environment
- Objectives:
- ☐ Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
  - ☐ Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments:
  - ☒ Implement public housing security improvements:
  - ☐ Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
  - ☐ Other: (list below)

**HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals**

- ☒ PHA Goal: Promote self-sufficiency and asset development of assisted households
- Objectives:
- ☒ Increase the number and percentage of employed persons in assisted families:
  - ☒ Provide or attract supportive services to improve assistance recipients' employability:

- ☒ Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- ☐ Other: (list below)

**HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

- ☒ PHA Goal: Ensure equal opportunity and affirmatively further fair housing  
Objectives:
  - ☒ Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability:
  - ☒ Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
  - ☐ Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
  - ☐ Other: (list below)

**Other PHA Goals and Objectives: (list below)**

PHA Goal: Promote energy efficiency practices and products when performing rehabilitation, repair and replacement in public housing developments.

Objective:

Incorporate, when applicable, Energy Star Program qualified products and practices.

**Annual PHA Plan**  
**PHA Fiscal Year 2008**  
[24 CFR Part 903.7]

**i. Annual Plan Type:**

Select which type of Annual Plan the PHA will submit.

☐ **Standard Plan**

**Streamlined Plan:**

- ☒ **High Performing PHA**  
☐ **Small Agency (<250 Public Housing Units)**  
☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

**ii. Executive Summary of the Annual PHA Plan**

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

The Bristol Tennessee Housing and Redevelopment Authority has completed this Agency Plan in consultation with BTHRA residents and the local community. The Plan was discussed with the Resident Advisory Board on April 10, 2008, April 24, 2008 and May 8, 2008. The public was afforded an opportunity to review the Plan and offer comments at a public hearing held on June 12, 2008. The Annual Agency Plan is summarized as follows:

1. Housing Needs

The BTHRA's current waiting lists are excessive and the demand for public housing (233) and Section 8 (270) is evident. The greatest demand is for small bedroom units (1 and 2 bedroom units).

2. Financial Resources

The BTHRA expects to expend approximately \$3,049,000 in the year 2008 for operations, capital improvements and administrative costs.

3. Eligibility, Selection and Admission Policies

The BTHRA has revised their standard operating policies and Section 8 policies to comply with the requirements of the QHWRA through regulations published in the Federal Register on March 29, 2000. These policies will continue to be updated as HUD issues further guidance.

As required under this section of the Plan and by regulations published in PIH Notice 2001-4, the BTHRA has reviewed its developments relative to income. The BTHRA has determined that they do not have a problem with concentration of high or low-income families. Further, the BTHRA has revised their admissions policies to assure that a concentration does not occur in the future.

4. Rent Determination-Discretionary Policy

The BTHRA's adopted discretionary rent policies include:

- ✓ Flat Rents
- ✓ \$50.00 minimum rent for Public Housing and Section 8.

5. Operations and Management

As a high performing PHA, the BTHRA is exempt from this component of the PHA Plan. However, the BTHRA has developed a Practice and Procedures Manual, which includes all of our policies relating to public housing and Section 8 administration, management, maintenance, leasing and occupancy. These policies have been revised to comply with the mandated requirements of the QHWRA.

6. Grievance Procedure

The BTHRA has revised its Grievance Procedure to comply with the QHWRA and will continue to make revisions as additional issues are addressed by HUD regulations.

7. Capital Improvements

The BTHRA's projected funding under the Capital Fund Program is \$412,292. The focus for the 2008 program year is to paint unit balconies and perform elevator and fire alarm upgrades in Development TN066-002 (Edgemont Tower) and paint interior

hallways in Development TN066-003 (Fort Shelby Tower). Additionally, the BTHRA will perform HVAC replacement in the two high rises as well as perform range/refrigerator replacement on a PHA-wide basis.

8. Demolition and/or Disposition

The BTHRA has no current plans for demolition or disposition.

9. Designation

The BTHRA plans to maintain the current elderly/disabled designation that applies to a portion of their units. The BTHRA has no plans to designate additional units in the future.

10. Conversion of Public Housing

The BTHRA conducted an initial conversion assessment for each development as recently mandated by the QHWRA through regulations published in the Federal Register on June 22, 2001. This assessment determined that conversion would not be cost effective as identified in Attachment D: "Component 10 (B) Voluntary Conversion Initial Assessments". Therefore, the BTHRA has no current plans to designate any developments or buildings to tenant-based assistance.

11. Homeownership

As a high performing PHA, the BTHRA is exempt from this component of the PHA Plan. However, the BTHRA is currently working to implement a Homeownership Program. The first phase is to include intention within this 2008 PHA Plan. Additionally, a copy of BTHRA's Section 8 Homeownership Capacity Statement is included as Attachment K.

12. Community Service and Self-Sufficiency Programs

As a high performing PHA, the BTHRA is exempt from this component of the PHA Plan. However, the BTHRA offers and provides a variety of program and services to their residents to achieve self-sufficiency. These services and programs include the Welfare-to-Work Program as well as referrals to local non-profit agencies providing supportive services; a Community Cares



Program, People Place and the UETHDA Nutrition Program which provides the elderly and disabled families with the tools needed to eat healthy, stay safe, improve personal hygiene, etc. Additionally, the BTHRA has adopted a policy relative to the community service requirement mandated by the QHWRA through regulations published in the Federal Register on March 29, 2000. A description of the BTHRA's community service requirement is shown in Attachment E: "Implementation of Public Housing Resident Community Service Requirement".

13. Safety and Crime Prevention

As a high performing PHA, the BTHRA is exempt from this component of the PHA Plan. However, the BTHRA currently has police officers patrolling Edgemont Tower and is in the process of installing security camera systems in both Fort Shelby and Edgemont Towers. Additionally, the BTHRA has a "one strike" and "zero tolerance" policy and performs a strict screening of applicants.

14. Ownership of Pets

The BTHRA has a policy related to tenant-owned pets. This policy permits all BTHRA residents to own pets as mandated by the QHWRA through regulations published in the Federal Register on July 10, 2000 and is subject to compliance with specific requirements of BTHRA's pet lease, which is included as Attachment F: "Pet Policy."

15. Civil Rights Certification

The BTHRA has included the required certification regarding Fair Housing and Civil Rights in this Plan.

16. Annual Audit

The BTHRA's most recent audit is on file at the local HUD office in Knoxville, Tennessee and is available for review at the main office during normal business hours.

17. Asset Management

As a high performing PHA, the BTHRA is exempt from this component of the PHA Plan. However, it is the goal of the BTHRA to manage their assets (physical properties, financial resources and manpower) as efficiently as possible to meet the intent of our Mission Statement.

**iii. Annual Plan Table of Contents**

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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**Attachments**

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:



Admissions Policy for Deconcentration **(See Attachment A)**



FY 2008 Capital Fund Program Annual Statement **(See Table Library)**

- ☐ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

**Optional Attachments:**

- ☐ PHA Management Organizational Chart
- ☒ FY 2008 Capital Fund Program 5 Year Action Plan (**See Table Library**)
- ☐ Public Housing Drug Elimination Program (PHDEP) Plan
- ☒ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) (**See Attachment B**)
- ☒ Other (List below, providing each attachment name)

**Attachment C: “Component 10 (B) Voluntary Conversion Initial Assessments”**

**Attachment D: “Implementation of Public Housing Resident Community Service Requirements”**

**Attachment E: “Pet Policy”**

**Attachment F: “Resident Survey Action Plan”**

**Attachment G: “Statement of Progress in Meeting the 5-Year Plan Mission and Goals”**

**Attachment H: “Resident Membership of the PHA Governing Board”**

**Attachment I: “Membership of the Resident Advisory Board”**

**Attachment J: “VAWA Policies for Public Housing and Section 8”**

**Attachment K: “Section 8 Homeownership Capacity Statement”**

**Supporting Documents Available for Review**

Indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair	Annual Plan: Housing Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
	Housing Choice (AI))) and any additional backup data to support statement of housing needs in the jurisdiction	
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs

<b>List of Supporting Documents Available for Review</b>		
<b>Applicable &amp; On Display</b>	<b>Supporting Document</b>	<b>Applicable Plan Component</b>
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
X	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program <input type="checkbox"/> check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
N/A	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

## **1. Statement of Housing Needs**

[24 CFR Part 903.7 9 (a)]

### **A. Housing Needs of Families in the Jurisdiction/s Served by the PHA**

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	736	3	3	2	1	NA	NA
Income >30% but <=50% of AMI	642	3	2	2	1	NA	NA
Income >50% but <80% of AMI	656	1	2	2	1	NA	NA
Elderly	712	1	2	2	1	NA	NA
Families with Disabilities	NA	NA	NA	2	1	NA	NA
Race/Ethnicity(w)	3,120	NA	NA	2	1	NA	NA
Race/Ethnicity (b)	127	NA	NA	2	1	NA	NA
Race/Ethnicity (h)	16	NA	NA	2	1	NA	NA
Race/Ethnicity	NA	NA	NA	NA	NA	NA	NA

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☒ Consolidated Plan of the Jurisdiction/s  
Indicate year: 2000
- ☒ U.S. Census data: the Comprehensive Housing Affordability Strategy  
("CHAS") dataset (City of Bristol, TN Jurisdictional Area)
- ☐ American Housing Survey data  
Indicate year:
- ☐ Other housing market study  
Indicate year:
- ☐ Other sources: (list and indicate year of information)

**B. Housing Needs of Families on the Public Housing and Section 8 Tenant-Based Assistance Waiting Lists**

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List	
Waiting list type: (select one)	
<input type="checkbox"/>	Section 8 tenant-based assistance
<input checked="" type="checkbox"/>	Public Housing
<input type="checkbox"/>	Combined Section 8 and Public Housing
<input type="checkbox"/>	Public Housing Site-Based or sub-jurisdictional waiting list (optional)
If used, identify which development/subjurisdiction:	

Housing Needs of Families on the Waiting List			
	# of families	% of total families	Annual Turnover 01/01/07 – 12/31/07
Waiting list total	233		97
Extremely low income <=30% AMI	157	67%	
Very low income (>30% but <=50% AMI)	64	27%	
Low income (>50% but <80% AMI)	12	5%	
Families with children	102	44%	
Elderly families	15	6%	
Families with Disabilities	50	21%	
Race/ethnicity (w)	213	91%	
Race/ethnicity (b)	19	8%	
Race/ethnicity (i)	1	1%	
Race/ethnicity	NA	NA	
Characteristics by Bedroom Size (Public Housing Only)			
0 BR	17	7%	
1 BR	108	46%	
2 BR	71	31%	
3 BR	20	9%	
4 BR	10	4%	
5 BR	7	3%	
Is the waiting list closed (select one)? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes: How long has it been closed (# of months)? <b>NA</b> Does the PHA expect to reopen the list in the PHA Plan year? <input type="checkbox"/> No <input type="checkbox"/> Yes Does the PHA permit specific categories of families onto the waiting list, even if generally closed? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input checked="" type="checkbox"/> Section 8 tenant-based assistance <input type="checkbox"/> Public Housing <input type="checkbox"/> Combined Section 8 and Public Housing <input type="checkbox"/> Public Housing Site-Based or sub-jurisdictional waiting list (optional) If used, identify which development/subjurisdiction:			
	# of families	% of total families	Annual Turnover 01/01/07 – 12/31/07
Waiting list total	270		59
Extremely low income <=30% AMI	198	73%	
Very low income (>30% but <=50% AMI)	59	22%	
Low income (>50% but <80% AMI)	13	5%	
Families with children	153	57%	
Elderly families	12	4%	
Families with Disabilities	66	24%	
Race/ethnicity (w)	247	91%	
Race/ethnicity (b)	22	8%	
Race/ethnicity (h)	1	1%	
Race/ethnicity	NA	NA	
Characteristics by Bedroom Size (Public Housing Only)			
0 BR	NA	NA	NA
1 BR	NA	NA	NA
2 BR	NA	NA	NA
3 BR	NA	NA	NA
4 BR	NA	NA	NA
5 BR	NA	NA	NA



### Housing Needs of Families on the Waiting List

Is the waiting list closed (select one)? ☒ No ☐ Yes

If yes:

How long has it been closed (# of months)? NA

Does the PHA expect to reopen the list in the PHA Plan year? ☐ No ☐ Yes

Does the PHA permit specific categories of families onto the waiting list, even if generally closed? ☐ No ☐ Yes

### C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

#### (1) Strategies

**Need: Shortage of affordable housing for all eligible populations**

**Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:**

Select all that apply

- ☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☒ Reduce turnover time for vacated public housing units
- ☒ Reduce time to renovate public housing units
- ☐ Seek replacement of public housing units lost to the inventory through mixed finance development
- ☐ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- ☒ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☒ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- ☒ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☐ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- ☒ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- ☐ Other (list below)

**Strategy 2: Increase the number of affordable housing units by:**

Select all that apply

- ☒ Apply for additional section 8 units should they become available

- ☒ Leverage affordable housing resources in the community through the creation of mixed - finance housing
- ☒ Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- ☐ Other: (list below)

**Need: Specific Family Types: Families at or below 30% of median**

**Strategy 1: Target available assistance to families at or below 30 % of AMI**

Select all that apply

- ☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- ☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- ☐ Employ admissions preferences aimed at families with economic hardships
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

**Need: Specific Family Types: Families at or below 50% of median**

**Strategy 1: Target available assistance to families at or below 50% of AMI**

Select all that apply

- ☐ Employ admissions preferences aimed at families who are working
- ☒ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

**Need: Specific Family Types: The Elderly**

**Strategy 1: Target available assistance to the elderly:**

Select all that apply

- ☐ Seek designation of public housing for the elderly
- ☒ Apply for special-purpose vouchers targeted to the elderly, should they become available
- ☐ Other: (list below)

**Need: Specific Family Types: Families with Disabilities**

**Strategy 1: Target available assistance to Families with Disabilities:**

Select all that apply

- ☒ Seek designation of public housing for families with disabilities
- ☒ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- ☐ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- ☒ Affirmatively market to local non-profit agencies that assist families with disabilities
- ☐ Other: (list below)

**Need: Specific Family Types: Races or ethnicities with disproportionate housing needs**

**Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:**

Select if applicable

- ☐ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
- ☐ Other: (list below)

**Strategy 2: Conduct activities to affirmatively further fair housing**

Select all that apply

- ☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
- ☒ Market the section 8 program to owners outside of areas of poverty /minority concentrations
- ☐ Other: (list below)

**Other Housing Needs & Strategies: (list needs and strategies below)**

**(2) Reasons for Selecting Strategies**

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

- ☒ Funding constraints
- ☒ Staffing constraints
- ☐ Limited availability of sites for assisted housing
- ☒ Extent to which particular housing needs are met by other organizations in the community
- ☒ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
- ☐ Influence of the housing market on PHA programs
- ☐ Community priorities regarding housing assistance
- ☒ Results of consultation with local or state government

- ☒ Results of consultation with residents and the Resident Advisory Board  
☐ Results of consultation with advocacy groups  
☐ Other: (list below)

## **2. Statement of Financial Resources**

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>1. Federal Grants (FY 2008 grants)</b>		
a) Public Housing Operating Fund	\$622,549	
b) Public Housing Capital Fund	\$414,292	
c) HOPE VI Revitalization	\$0	
d) HOPE VI Demolition	\$0	
e) Annual Contributions for Section 8 Tenant-Based Assistance	\$707,956	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	\$0	
g) Resident Opportunity and Self-Sufficiency Grants	\$0	
h) Community Development Block Grant	\$0	
i) HOME	\$0	
Other Federal Grants (list below)	\$0	
<b>2. Prior Year Federal Grants (unobligated funds only) (list below)</b>		
FFY 2007 CFP	\$379,609	Capital Improvements
<b>3. Public Housing Dwelling Rental Income</b>	\$830,796	Operations

<b>Financial Resources: Planned Sources and Uses</b>		
<b>Sources</b>	<b>Planned \$</b>	<b>Planned Uses</b>
<b>4. Other income</b> (list below)		
Excess Utilities	\$21,481	Operations
Tenant Charges/Late Fees	\$48,682	Operations
Equipment Disposition	\$12,020	Operations
<b>5. Non-federal sources</b> (list below)		
PHA Investment Income	\$12,072	Operations
<b>Total Resources</b>	<b>\$3,049,457</b>	

### **3. PHA Policies Governing Eligibility, Selection, and Admissions**

[24 CFR Part 903.7 9 (c)]

#### **A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

##### **(1) Eligibility**

a. When does the PHA verify eligibility for admission to public housing? (select all that apply)

- ☒ When families are within a certain number of being offered a unit: (state number) 10
- ☒ When families are within a certain time of being offered a unit: (state time) 2 months
- ☐ Other: (describe)

b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?

- ☒ Criminal or Drug-related activity
- ☒ Rental history
- ☒ Housekeeping
- ☒ Other (describe) Credit Report

c. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?

d. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?

- e. ☒ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

**(2)Waiting List Organization**

- a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)

- ☒ Community-wide list  
☐ Sub-jurisdictional lists  
☐ Site-based waiting lists  
☐ Other (describe)

- b. Where may interested persons apply for admission to public housing?

- ☒ PHA main administrative office  
☐ PHA development site management office  
☐ Other (list below)

- c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection **(3) Assignment**

**Not Applicable**

1. How many site-based waiting lists will the PHA operate in the coming year? **NA**

2. ☐ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  
If yes, how many lists? **NA**

3. ☐ Yes ☐ No: May families be on more than one list simultaneously?  
If yes, how many lists? **NA**

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? **NA**

- ☐ PHA main administrative office  
☐ All PHA development management offices  
☐ Management offices at developments with site-based waiting lists  
☐ At the development to which they would like to apply  
☐ Other (list below)

**(3) Assignment**

- a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- ☐ One
- ☐ Two
- ☒ Three or More

b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA: **Not Applicable**

#### **(4) Admissions Preferences**

a. Income targeting:

☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- ☒ Emergencies
- ☐ Overhoused
- ☒ Underhoused
- ☒ Medical justification
- ☒ Administrative reasons determined by the PHA (e.g., to permit modernization work)
- ☐ Resident choice: (state circumstances below)
- ☐ Other: (list below)

c. Preferences

1. ☒ Yes ☐ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection **(5) Occupancy**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences) **Not Applicable**

Former Federal preferences:

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
- ☒ Victims of domestic violence
- ☐ Substandard housing
- ☐ Homelessness
- ☐ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

2 Date and Time

Former Federal preferences:

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

- (1) Victims of domestic violence  
Substandard housing  
Homelessness  
High rent burden

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans' families
- ☐ Residents who live and/or work in the jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- ☐ The PHA applies preferences within income tiers
- ☒ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements



### **(5) Occupancy**

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- ☒ The PHA-resident lease
- ☒ The PHA's Admissions and (Continued) Occupancy policy
- ☒ PHA briefing seminars or written materials
- ☒ Other source (list) **Resident Orientation**

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- ☒ At an annual reexamination and lease renewal
- ☒ Any time family composition changes
- ☒ At family request for revision
- ☐ Other (list)

### **(6) Deconcentration and Income Mixing**

a. ☒ Yes ☐ No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.

b. ☐ Yes ☒ No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows: **Not Applicable**

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]

### **B. Section 8**

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

### **(1) Eligibility**

- a. What is the extent of screening conducted by the PHA? (select all that apply)
- ☒ Criminal or drug-related activity only to the extent required by law or regulation
  - ☐ Criminal and drug-related activity, more extensively than required by law or regulation
  - ☐ More general screening than criminal and drug-related activity (list factors below)
  - ☒ Other (list below)

**Previous participation and/or back balances**

- b. ☒ Yes ☐ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- c. ☒ Yes ☐ No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. ☒ Yes ☐ No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- ☐ Criminal or drug-related activity
  - ☒ Other (describe below)

If requested, the information in BTHRA's files relative to the suitability of the tenant if a Release of Information form has been signed by the tenant.

**(2) Waiting List Organization**

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- ☒ None
  - ☐ Federal public housing
  - ☐ Federal moderate rehabilitation
  - ☐ Federal project-based certificate program
  - ☐ Other federal or local program (list below)
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- ☐ PHA main administrative office
  - ☒ Other (list below)

## PHA Site Management Office

### **(3) Search Time**

- a. ☒ Yes ☐ No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state circumstances below:

An extension is granted based on special needs and handicap as well as additional time to find a suitable unit.

### **(4) Admissions Preferences**

- a. Income targeting

- ☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

- b. Preferences

1. ☒ Yes ☐ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences) **Not Applicable**

Former Federal preferences

- ☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  
☒ Victims of domestic violence  
☐ Substandard housing  
☐ Homelessness  
☐ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability  
☐ Veterans and veterans' families  
☐ Residents who live and/or work in your jurisdiction  
☐ Those enrolled currently in educational, training, or upward mobility programs  
☐ Households that contribute to meeting income goals (broad range of incomes)  
☐ Households that contribute to meeting income requirements (targeting)

- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a “1” in the space that represents your first priority, a “2” in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use “1” more than once, “2” more than once, etc.

## 2 Date and Time

### Former Federal preferences

Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

- (1) Victims of domestic violence
- Substandard housing
- Homelessness
- High rent burden

### Other preferences (select all that apply)

- ☐ Working families and those unable to work because of age or disability
- ☐ Veterans and veterans’ families
- ☐ Residents who live and/or work in your jurisdiction
- ☐ Those enrolled currently in educational, training, or upward mobility programs
- ☐ Households that contribute to meeting income goals (broad range of incomes)
- ☐ Households that contribute to meeting income requirements (targeting)
- ☐ Those previously enrolled in educational, training, or upward mobility programs
- ☐ Victims of reprisals or hate crimes
- ☐ Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

- ☒ Date and time of application
- ☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for “residents who live and/or work in the jurisdiction” (select one) **Not Applicable**

- ☐ This preference has previously been reviewed and approved by HUD
- ☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

- ☐ The PHA applies preferences within income tiers
- ☐ Notapplicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

#### **(5) Special Purpose Section 8 Assistance Programs**

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

- ☒ The Section 8 Administrative Plan
- ☒ Briefing sessions and written materials
- ☐ Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

- ☒ Through published notices
- ☐ Other (list below)

### **4. PHA Rent Determination Policies**

[24 CFR Part 903.7 9 (d)]

#### **A. Public Housing**

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

#### **(1) Income Based Rent Policies**

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

- ☐ The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

- ☒ The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0
- ☐ \$1-\$25
- ☒ \$26-\$50 (\$50.00)

2. ☐ Yes ☒ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

The BTHRA uses HUD's required minimum rent hardship exemptions.

3. If yes to question 2, list these policies below:  
Rents set at less than 30% than adjusted income

1. ☒ Yes ☐ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

The BTHRA utilizes flat rents as identified in other sections of this component.

- d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply) **Not Applicable**

- ☐ For the earned income of a previously unemployed household member
- ☐ For increases in earned income
- ☐ Fixed amount (other than general rent-setting policy)  
If yes, state amount/s and circumstances below:

- ☐ Fixed percentage (other than general rent-setting policy)  
If yes, state percentage/s and circumstances below:

- ☐ For household heads
- ☐ For other family members
- ☐ For transportation expenses
- ☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families
- ☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- ☐ Yes for all developments
- ☐ Yes but only for some developments
- ☒ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- ☐ For all developments **Not Applicable**
- ☐ For all general occupancy developments (not elderly or disabled or elderly only)
- ☐ For specified general occupancy developments
- ☐ For certain parts of developments; e.g., the high-rise portion
- ☐ For certain size units; e.g., larger bedroom sizes
- ☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply) **Not Applicable**

- ☐ Market comparability study
- ☐ Fair market rents (FMR)
- ☐ 95<sup>th</sup> percentile rents
- ☐ 75 percent of operating costs
- ☐ 100 percent of operating costs for general occupancy (family) developments
- ☐ Operating costs plus debt service
- ☐ The "rental value" of the unit
- ☐ Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- ☐ Never
- ☐ At family option
- ☒ Any time the family experiences an income increase
- ☐ Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)\_\_\_\_\_
- ☒ Other (list below)

The families are required to report all income changes and changes in family composition. In the case of income, the rent will only be changed if the new income amount results in a rent decrease. In the case of change in family composition, the rent will only be changed if the new household member receives income and then the rent would be increased.

g. ☐ Yes ☒ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

## **(2) Flat Rents**

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

- ☒ The section 8 rent reasonableness study of comparable housing
- ☐ Survey of rents listed in local newspaper
- ☐ Survey of similar unassisted units in the neighborhood
- ☐ Other (list/describe below)

## **B. Section 8 Tenant-Based Assistance**

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. **Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).**

## **(1) Payment Standards**

Describe the voucher payment standards and policies.

a. What is the PHA's payment standard? (select the category that best describes your standard)

- ☐ At or above 90% but below 100% of FMR
- ☒ 100% of FMR
- ☐ Above 100% but at or below 110% of FMR
- ☐ Above 110% of FMR (if HUD approved; describe circumstances below)

b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply) **Not Applicable**

- ☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ The PHA has chosen to serve additional families by lowering the payment standard
- ☐ Reflects market or submarket
- ☐ Other (list below)

c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply) **Not Applicable**

- ☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
- ☐ Reflects market or submarket
- ☐ To increase housing options for families
- ☐ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

- ☒ Annually
- ☐ Other (list below)



e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

- ☒ Success rates of assisted families  
☒ Rent burdens of assisted families  
☐ Other (list below)

## **(2) Minimum Rent**

a. What amount best reflects the PHA's minimum rent? (select one)

- ☐ \$0  
☐ \$1-\$25  
☒ \$26-\$50 (\$50.00)

b. ☐ Yes ☒ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

The BTHRA uses HUD's required minimum rent hardship exemptions.

## **5. Operations and Management**

[24 CFR Part 903.7 9 (e)]

### **Component Not Applicable**

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

### **A. PHA Management Structure Not Applicable**

Describe the PHA's management structure and organization.

(select one)

- ☐ An organization chart showing the PHA's management structure and organization is attached.  
☐ A brief description of the management structure and organization of the PHA follows:

### **B. HUD Programs Under PHA Management Not Applicable**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

<b>Program Name</b>	<b>Units or Families Served at Year Beginning</b>	<b>Expected Turnover</b>
Public Housing		
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section 8 Certificates/Vouchers		

(list individually)		
Public Housing Drug Elimination Program (PHDEP)		
Other Federal Programs (list individually)		

### **C. Management and Maintenance Policies** **Not Applicable**

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

(2) Section 8 Management: (list below)

## **6. PHA Grievance Procedures**

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

### **A. Public Housing**

1. ☐ Yes ☒ No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

**Not Applicable**

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

- ☒ PHA main administrative office  
☐ PHA development management offices  
☐ Other (list below)

### **B. Section 8 Tenant-Based Assistance**

1. ☐ Yes ☒ No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section

8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

**Not Applicable**

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

- ☒ PHA main administrative office  
☐ Other (list below)

## **7. Capital Improvement Needs**

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

### **A. Capital Fund Activities**

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

#### **(1) Capital Fund Program Annual Statement**

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

- ☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) **(See Table Library)**

-or-

- ☐ The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

#### **(2) Optional 5-Year Action Plan**

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

- a. ☒ Yes ☐ No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

☒ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name) **(See Table Library)**

-or-

☐ The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

**B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)**

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary)  
b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)

1. Development name:
2. Development (project) number:
3. Status of grant: (select the statement that best describes the current status)
  - ☐ Revitalization Plan under development
  - ☐ Revitalization Plan submitted, pending approval
  - ☐ Revitalization Plan approved
  - ☐ Activities pursuant to an approved Revitalization Plan underway

☐ Yes ☒ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?  
If yes, list development name/s below:

☐ Yes ☒ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?  
If yes, list developments or activities below:

☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?  
If yes, list developments or activities below:

## **8. Demolition and Disposition**

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to component 9; if “yes”, complete one activity description for each development.)

### 2. Activity Description

**Not Applicable**

- ☐ Yes ☐ No: Has the PHA provided the activities description information in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 9. If “No”, complete the Activity Description table below.)

<b>Demolition/Disposition Activity Description</b>
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

## **9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities**

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities

or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If “No”, skip to component 10. If “yes”, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

**2. Activity Description**

**Not Applicable**

☐ Yes ☐ No:

Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If “yes”, skip to component 10. If “No”, complete the Activity Description table below.

<b>Designation of Public Housing Activity Description</b>
1a. Development name:
1b. Development (project) number:
2. Designation type: Occupancy by only the elderly <input type="checkbox"/> Occupancy by families with disabilities <input type="checkbox"/> Occupancy by only elderly families and families with disabilities <input type="checkbox"/>
3. Application status (select one) Approved; included in the PHA’s Designation Plan <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)
5. If approved, will this designation constitute a (select one) <input type="checkbox"/> New Designation Plan <input type="checkbox"/> Revision of a previously-approved Designation Plan?
6. Number of units affected:
7. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

**10. Conversion of Public Housing to Tenant-Based Assistance**

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

**A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act**

1. ☐ Yes ☒ No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description **Not Applicable**

- ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.

Conversion of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No:	Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Plan (select the statement that best describes the current status)	<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved: _____) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved: _____) <input type="checkbox"/> Requirements no longer applicable: vacancy rates are less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units

☐ Other: (describe below)

**B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937**

**C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937**

## **11. Homeownership Programs Administered by the PHA**

[24 CFR Part 903.7 9 (k)]

### **A. Public Housing**

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. ☐ Yes ☒ No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If “No”, skip to component 11B; if “yes”, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high performing PHA** status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description **Not Applicable**  
☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If “yes”, skip to component 12. If “No”, complete the Activity Description table below.)

<b>Public Housing Homeownership Activity Description (Complete one for each development affected)</b>
1a. Development name: 1b. Development (project) number:
2. Federal Program authority: <input type="checkbox"/> HOPE I <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)
3. Application status: (select one) <input type="checkbox"/> Approved; included in the PHA’s Homeownership Plan/Program



<input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)
5. Number of units affected: 6. Coverage of action: (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development

## B. Section 8 Tenant Based Assistance

1. ☒ Yes ☐ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to component 12; if “yes”, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

A copy of the BTHRA’s Section 8 Homeownership Capacity Statement is included as Attachment K.

### 2. Program Description:

#### a. Size of Program

- ☒ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

- ☒ 25 or fewer participants  
☐ 26 - 50 participants  
☐ 51 to 100 participants  
☐ more than 100 participants

#### b. PHA-established eligibility criteria

- ☐ Yes ☒ No: Will the PHA’s program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?  
If yes, list criteria below:

## **12. PHA Community Service and Self-sufficiency Programs**

[24 CFR Part 903.7 9 (l)]

### **Component Not Applicable**

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

### **A. PHA Coordination with the Welfare (TANF) Agency**

#### **Not Applicable**

#### **1. Cooperative agreements:**

- ☐ Yes ☐ No: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?

If yes, what was the date that agreement was signed? DD/MM/YY

#### **2. Other coordination efforts between the PHA and TANF agency (select all that apply)**

- ☐ Client referrals
- ☐ Information sharing regarding mutual clients (for rent determinations and otherwise)
- ☐ Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
- ☐ Jointly administer programs
- ☐ Partner to administer a HUD Welfare-to-Work voucher program
- ☐ Joint administration of other demonstration program
- ☐ Other (describe)

### **B. Services and programs offered to residents and participants**

#### **Not Applicable**

#### **(1) General**

##### **a. Self-Sufficiency Policies**

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas?

(select all that apply)

- ☐ Public housing rent determination policies
- ☐ Public housing admissions policies
- ☐ Section 8 admissions policies
- ☐ Preference in admission to section 8 for certain public housing families
- ☐ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA
- ☐ Preference/eligibility for public housing homeownership option participation
- ☐ Preference/eligibility for section 8 homeownership option participation
- ☐ Other policies (list below)

b. Economic and Social self-sufficiency programs

☐ Yes ☐ No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If “yes”, complete the following table; if “no” skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use. )

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
<b>Not Applicable</b>				

**(2) Family Self Sufficiency program/s**

a. Participation Description **Not Applicable**

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2001 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing		
Section 8		

b. ☐ Yes ☐ No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?

If no, list steps the PHA will take below:

**C. Welfare Benefit Reductions**

**Not Applicable**

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

- ☒ Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
- ☒ Informing residents of new policy on admission and reexamination
- ☒ Actively notifying residents of new policy at times in addition to admission and reexamination.
- ☒ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
- ☒ Establishing a protocol for exchange of information with all appropriate TANF agencies
- ☐ Other: (list below)

**D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937**

### **13. PHA Safety and Crime Prevention Measures**

[24 CFR Part 903.7 9 (m)]

#### **Component Not Applicable**

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

#### **A. Need for measures to ensure the safety of public housing residents**

##### **Not Applicable**

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

- ☐ High incidence of violent and/or drug-related crime in some or all of the PHA's developments
- ☐ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
- ☐ Residents fearful for their safety and/or the safety of their children
- ☐ Observed lower-level crime, vandalism and/or graffiti
- ☐ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
- ☐ Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

- ☐ Safety and security survey of residents
- ☐ Analysis of crime statistics over time for crimes committed "in and around" public housing authority
- ☐ Analysis of cost trends over time for repair of vandalism and removal of graffiti
- ☐ Resident reports
- ☐ PHA employee reports
- ☐ Police reports

- ☐ Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs
- ☐ Other (describe below)

3. Which developments are most affected? (list below)

**B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year**

**Not Applicable**

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

- ☐ Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities
- ☐ Crime Prevention Through Environmental Design
- ☐ Activities targeted to at-risk youth, adults, or seniors
- ☐ Volunteer Resident Patrol/Block Watchers Program
- ☐ Other (describe below)

2. Which developments are most affected? (list below)

**C. Coordination between PHA and the police**

**Not Applicable**

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

- ☐ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
- ☐ Police provide crime data to housing authority staff for analysis and action
- ☐ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
- ☐ Police regularly testify in and otherwise support eviction cases
- ☐ Police regularly meet with the PHA management and residents
- ☐ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
- ☐ Other activities (list below)

2. Which developments are most affected? (list below)

**D. Additional information as required by PHDEP/PHDEP Plan**

PHAs eligible for FY 2008 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

**Not Applicable**

- ☐ Yes ☐ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

☐ Yes ☐ No: Has the PHA included the PHDEP Plan for FY 2008 in this PHA Plan?

☐ Yes ☐ No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_)

#### **14. RESERVED FOR PET POLICY**

[24 CFR Part 903.7 9 (n)]

#### **15. Civil Rights Certifications**

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

#### **16. Fiscal Audit**

[24 CFR Part 903.7 9 (p)]

1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?  
(If no, skip to component 17.)
2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☐ Yes ☒ No: Were there any findings as the result of that audit?
4. ☐ Yes ☐ No: If there were any findings, do any remain unresolved?  
If yes, how many unresolved findings remain? NA
5. ☐ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD?  
If not, when are they due (state below)? NA

#### **17. PHA Asset Management**

[24 CFR Part 903.7 9 (q)]

**Component Not Applicable**

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. ☐ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and

other needs that have **not** been addressed elsewhere in this PHA Plan?

2. What types of asset management activities will the PHA undertake? (select all that apply)

- ☐ Not applicable
- ☐ Private management
- ☐ Development-based accounting
- ☐ Comprehensive stock assessment
- ☐ Other: (list below)

3. ☐ Yes ☐ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

## **18. Other Information**

[24 CFR Part 903.7 9 (r)]

### **A. Resident Advisory Board Recommendations**

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

- ☒ Attached at Attachment (File name) (**See Attachment B**)
- ☐ Provided below:

3. In what manner did the PHA address those comments? (select all that apply)

- ☒ Considered comments, but determined that no changes to the PHA Plan were necessary.
- ☐ The PHA changed portions of the PHA Plan in response to comments  
List changes below:
- ☐ Other: (list below)

### **B. Description of Election process for Residents on the PHA Board**

1. ☐ Yes ☒ No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. ☐ Yes ☒ No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

The resident which currently serves on the Board of Commissioners of BTHRA was appointed by the Mayor of Bristol, Tennessee.

3. Description of Resident Election Process **Not Applicable**

a. Nomination of candidates for place on the ballot: (select all that apply)

- ☐ Candidates were nominated by resident and assisted family organizations
- ☐ Candidates could be nominated by any adult recipient of PHA assistance
- ☐ Self-nomination: Candidates registered with the PHA and requested a place on ballot
- ☐ Other: (describe)

b. Eligible candidates: (select one)

- ☐ Any recipient of PHA assistance
- ☐ Any head of household receiving PHA assistance
- ☐ Any adult recipient of PHA assistance
- ☐ Any adult member of a resident or assisted family organization
- ☐ Other (list)

c. Eligible voters: (select all that apply)

- ☐ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)
- ☐ Representatives of all PHA resident and assisted family organizations
- ☐ Other (list)

**C. Statement of Consistency with the Consolidated Plan**

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

City of Bristol, Tennessee

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☒ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☐ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- ☐ Other: (list below)



3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

Please refer to the executive summary of the consolidated plan for the City of Bristol, Tennessee.

**D. Other Information Required by HUD**

Use this section to provide any additional information requested by HUD.

**19. Definition of “Substantial Deviation and Significant Amendment or Modification” [903.7(r)]:**

The BTHRA and HUD will consider the following actions to be significant amendments or modifications:

- changes to rent or admission policies or organization of waiting list;
- additions of non-emergency work items (items not included in the current Annual Statement or Five Year Plan) or change in use of replacement reserve funds under the Capital Fund;
- any change with the regard to demolition or disposition, designation, homeownership programs or conversion activities.

An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements; such changes will not be considered significant amendments by HUD.

## **Attachments**

Use this section to provide any additional attachments referenced in the Plans.

### **Attachment A**

#### **“Deconcentration Policy”**

##### Deconcentration Policy

- (1) The objective of the Deconcentration Policy for the BTHRA is to achieve the goal that families are housed in a manner that will prevent a concentration of poverty families and/or a concentration of higher income families in any one development or census tract. The BTHRA will take actions as necessary to achieve the goal that no individual development has a concentration of higher income or lower income families. To ensure that the BTHRA does not concentrate families with higher or lower income levels in any one development, the BTHRA will track the status of family income, by development, on a monthly basis utilizing income reports generated by the BTHRA’s computer system.
- (2) The BTHRA will periodically compare the relative incomes of its developments to the relative incomes of the census tracts in which they are located. Where significant differences are identified, income targeting will be applied.

##### Income Targeting

- (1) To accomplish the Deconcentration goals, the BTHRA will take the following actions:
  - (a) At the beginning of each fiscal year the BTHRA will establish a numerical goal for admission of families whose incomes are at or below 30 percent of the area median income. The target annual goal will be calculated by taking 40 percent of the total number of move-ins from the previous fiscal year.
  - (b) The BTHRA will limit the number of admissions to ensure that not less than 40 percent of admissions are families with incomes at or below 30 percent of the area median income.
  - (c) The BTHRA will skip families on the waiting list or skip developments to accomplish these goals.
- (2) The BTHRA will not hold units vacant to accomplish these goals.

**Attachment B**  
**“Comments of Resident Advisory Board”**

The BTHRA conducted its Resident Advisory Board meetings on April 10, 2008, April 24, 2008 and May 8, 2008 at Edgemont Towers. The meetings were held to explain the QHWRA, to discuss the draft FFY 2008 PHA Plan with the Board and receive their comments and recommendations relative to the contents of both the Five Year Plan and Annual Plan. A thorough explanation of the contents of the PHA Plan was discussed with the Board as well as how the Authority arrived with the information.

## Attachment C

### “Component 10 (B) Voluntary Conversion Initial Assessments”

- a. How many of the PHA’s developments are subject to the Required Initial Assessment? **One (1)**
- b. How many of the PHA’s developments are not subject to the Required Initial Assessments based on exemptions (e.g. elderly and/or disabled developments not general occupancy projects)? **Two (2)**
- c. How many Assessments were conducted for the PHA’s covered developments?  
**One (1)**
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments:

Development Name	Number of Units
None	

- e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments: **Not Applicable**

## Attachment D

### “Implementation of Public Housing Resident Community Service Requirement”

#### I. GENERAL INFORMATION

##### New Community Service Requirements

##### A. Background

The Quality Housing and Work Responsibility Act of 1998 (QHWRA) was signed into law by President Clinton on October 21, 1998. This ACT is sometimes called the Public Housing Reform Act and the final rules required by QHWRA were published in the Federal Register on March 29, 2000. 24 CFR-Subpart F, 960.00 lists the statutory requirements, which must be incorporated by local PHA/PHC, etc. into policy to meet Community Service activities.

##### B. What is Community Service?

Community Service is defined as the performance of work, or duties that are of public benefit and serve to improve the quality of life, to enhance resident self-sufficiency, or increase resident self-responsibility in the community. Community Service is not employment and may not include political activities.

##### C. Who must comply?

The final rule requires **all** adult family members who do not qualify for a statutory exemption.

##### D. Who is exempt?

An **exempt** person is an adult family member who:

- (1) Is **62** years of age or older;
- (2) Is blind or disabled as defined under the current Social Security Act. Existing documentation will be acceptable as evidence of a disability and disabled persons will be permitted to **self-certify** as to whether they **cannot** perform community service provisions; or is a primary care giver to such above defined individual;
- (3) Is engaged in work activities;
- (4) Meets the requirements for being exempted under a State program funded under Part A of the Title IV of the Social Security Act (42 U.S.C. 601) or any other State Administered welfare program of the State in which the PHA is located, including a welfare-to-work program.
- (5) Is a family member receiving assistance, benefits of services under a State program funded under Part A of Title IV of the Social Security Act (42 U.S.C. 601, et seq.) or under any other welfare program of the State in which the Housing Authority is located.

**E. What is the Annual Obligation?**

Each adult family member who is not exempt must:

- (1) Contribute **8 hours per month (96 hours per year)** of Community Service.

**F. What happens when someone does not comply?**

The lease specifies that it shall be renewed automatically unless the family fails to comply with the community service requirement. Violation of the service requirement is grounds for non-renewal of the lease at the end of the 12-month lease term, but not for the termination of tenancy during the course of the 12-month lease term prior to the re-certification process.

In addition, each family member who fails to complete their entire obligation shall be given the opportunity to develop a plan with PHA approval to perform these non-compliant hours in addition to their regularly obligated 96 hours in the second year of residency. At the end of the second year, if all outstanding obligated hours of Community Service are not met, the PHA may commence eviction proceedings.

**G. When does the Community Service Requirements start?**

All PHAs and residents must comply with the requirements of Subpart F beginning with a PHAs fiscal year that begins on or after October 1, 2000.

**H. How does the PHA administer the program?**

The PHA may administer qualifying Community Service activities directly through its own staff or through a third party community entity that has an agreement with the PHA.

**I. PHA Responsibilities to its residents.**

- (1) The PHA must develop a policy that describes how it will determine which family members are subject to or exempt from performing the service requirement and the process for verifying changes to existing status.
- (2) The PHA must provide every family a written description of the service requirement and the process for claiming status. The PHA must also notify each adult family member of its initial determination of exempt and non-exempt status.
- (3) The PHA must review family compliance with the service requirements and must verify such compliance annually at least thirty (30) days before the renewal of the lease (Annual Re-Certification).
- (4) The PHA must retain reasonable documentation of service requirement performance or exemption in the resident's file.

**II. PROGRAM ADMINISTRATION**

The Bristol Tennessee Housing and Redevelopment Authority's policy is designed to identify which adult family members are subject to or exempt from the service requirements; to explain how the PHA will administer the program; to identify PHA and/or third party certification opportunities available to eligible work activities with fair and equitable actions.

## A. PHA Responsibilities

### (1) Eligibility Determination

The PHA will review every existing resident file to determine each adult member's status regarding Community Service per the following guidelines:

- a. An **exempt** person is an adult family member who:
  1. Is **62** years of age or older;
  2. Is blind or disabled as defined under the current Social Security Act. Existing documentation will be acceptable as evidence of a disability and disabled person will be permitted to **self-certify** as to whether they **cannot** perform Community Service provisions; or is a primary care giver to such above defined individual;
  3. Is engaged in work activities;
  4. Meets the requirements for being exempted under a State Program funded under Part A of the Title IV Social Security Act (42 U.S.C. 601) or any other State administered welfare program of the State in which the PHA is located, including a welfare-to-work program.
  5. Us a family member receiving assistance benefits or services under a State Program funded under Part A of Title IV of the Social Security Act (42 U.S.C. 601 et seq.) or under any other welfare program of the State in which the Housing Authority is located.
- b. As family status is determined, a letter or other certifiable document of receipt will be sent to each adult member of that family notifying them of their status (exempt or non-exempt) and explaining the steps they should immediately proceed with through their housing representative.
- c. Verification of Compliance.

The Authority is required to review family compliance with service requirement, and must verify such compliance annually at least thirty (30) days before the end of the twelve (12) month lease term (annual re-certification time). Evidence of service performance and/or exemption must be maintained in each participant file.

- d. Notice of Non-compliance.

If the Authority determines that, a family member who is subject to fulfilling a service requirement, but has violated the family's obligation (a non-compliant resident) the Authority must notify the specific family member of this determination.

The Notice of Non-compliance must:

1. Briefly describe the non-compliance (inadequate number of hours).
2. State that the Authority will not renew the lease at the end of the twelve (12) month lease term unless:

The resident or any other non-compliant adult family member enters into a written agreement with the Authority to cure the non-compliance and in fact performs the exact terms of the agreement.

Or

The family provides written assurance satisfactory to the PHA that the resident or other non-compliant adult family member no longer resides in the unit.

This Notice of Non-compliance must also state the resident may request a grievance hearing and that the resident may exercise any available judicial remedy to seek timely redress for the Authority's non-renewal of the lease because of a non-compliance determination.

- e. Resident agreement to comply with the service requirement.

The written agreement entered into with the Authority to cure the service requirement non-compliance by the resident and any other adult family member must:

1. Agree to complete additional service hours needed to make up the total number of hours required over the twelve (12) month term of the new lease.
2. State that all other members of the family subject to the service requirement are in current compliance with the service requirement or are no longer residing in the unit.

- f. The Bristol Tennessee Housing and Redevelopment Authority has developed the following list of agencies certifiable and/or third party work activities of which each non-exempt adult family member can select to perform their individual service requirement.

The Authority has identified the following PHA certifiable activities, which are available to meet the requirements:

Neighborhood Watch  
Playground Monitor  
Bus Stop Monitor  
Clothes Closet Worker  
Or other certifiable activities

The following third party entities have entered into an agreement with the Authority to provide activities available to satisfy the Community Service activities:



Volunteer Bristol  
1606 W. State Street  
Bristol, TN 37620  
(423) 968-9017

**III. DOCUMENTATION**

- A. Resident Notification Letter**
- B. PHA Certification Form**
- C. Third Party Certification Form**

**Attachment E**  
**“Pet Policy”**

**Bristol Tennessee Housing and Redevelopment Authority**  
**Lease Addendum to Govern Pet Ownership**

As applicable, Section 526 of the Quality Housing and Work Responsibility Act of 1998 (Public Law 105-276, 112 STAT.2451, 2568 the Public Housing reform Act of 1998) added new section 31 (captioned a Pet Ownership in Public Housing) to the United States Act of 1937. Section 31 establishes pet ownership requirements for tenants of public housing other than federally assisted rental housing for the elderly or persons with disabilities. Section 227 of the Housing-Rural Recovery Act of 1983 (12 U.S.C. 1701r-1)(the 1983 Act) covers pet ownership requirements for the elderly or persons with disabilities. This rule does not alter or affect these regulations in any way, nor would the regulation in Section 227 of the 1983 Act apply in any way to Section 3; of the 1937 Act. Section 31 of the 1937 Act is being implemented by adding a subpart G to 24CFR Part 960. The following policies must be complied with for pet ownership in the Bristol Tennessee Housing and Redevelopment Authority (BTHRA):

1. Pet ownership: A Tenant (Head of Household) may own **one (1)** common household pet or have **one (1)** common household pet present in the dwelling unit of such Tenant, subject to the following conditions:
  - a. If the pet is a dog or cat, it must be neutered/spayed. Evidence of neutering/spaying can be provided by a statement/bill from veterinarian and/or staff of the humane society.
  - b. If the pet is a bird, it shall be housed in a birdcage and cannot be let out of the cage at any time.
  - c. If the pet is fish, the aquarium must be fifty gallons or less, and the container must be placed in a safe location in the unit. The Tenant is limited to one container for the fish; however, there is no limit on the number of fish that can be maintained in the container as long as the container is maintained in a safe and nonhazardous manner.
  - d. If the pet is a dog, the height cannot exceed 15 inches tall (fully grown).
  - e. If the pet is a cat, the Tenant must provide waterproof and leak proof litter boxes for cat waste, which must be kept inside the dwelling unit. Cardboard boxes are not acceptable and will not be approved. The Tenant shall not permit refuse from litter boxes to accumulate nor to become unsightly or unsanitary. The Tenant must not dispose of litter box waste by depositing in a toilet or dumping on the grounds outside

the unit. Also, the height of a cat cannot exceed 10 inches tall (fully grown).

- f. If the pet is a cat or dog, it must have received rabies and distemper inoculations or boosters, as applicable. Evidence of inoculations must be provided by a statement/bill from the veterinarian or staff of the humane society.
- g. All pets must be housed within the unit and no facilities can be constructed outside the unit for any pet. No pet shall be permitted to be loose and if the pet is taken outside the dwelling unit, it must be taken outside on a leash and kept off other Tenants' lawns. Pets may not be enclosed, chained or tied outside the unit or to the porch or railings. No pets other than those owned by the Tenant are permitted on the BTHRA premises and Tenants shall not engage in "pet-sitting".
- h. All authorized pets must be under the control of an adult. An unleashed pet, or one tied to a fixed object, is not considered under the control of an adult. Pets, which are unleashed, or leashed and unattended, on BTHRA property, will be impounded and taken to the local animal shelter. It shall be the responsibility of the Tenant to reclaim the pet and at the expense of the Tenant. Also, if a member of the BTHRA staff has to take a pet to the animal shelter, the Tenant will be charged \$50.00 to cover the expense of taking the pet to the animal shelter. If the animal shelter charges a fee to accept a pet, that expense will also be charged to the Tenant.
- i. Pets may not be left unattended for more than twenty-four (24) consecutive hours. If it is reported to BTHRA staff that a pet has been left unattended for more than a twenty-four (24) hour period, BTHRA staff may enter the unit and remove the pet and transfer the pet to the animal shelter. Any expense to remove the pet from any facility will be the responsibility of the Tenant.
- j. All authorized pets must be kept in a nutritional, clean and sanitary manner. The Tenant will be responsible for the proper care of the pet such as nutrition, grooming, exercise, flea control and routine veterinary care. The Tenant will also be responsible for keeping the inside and outside of the dwelling unit clean and free of pet odors, insect infestation and waste and maintain the unit in a sanitary condition. If it becomes necessary for the BTHRA to rid the unit of pest infestation (fleas, ticks, etc.) or clean, deodorize and sanitize the unit as necessitated by the presence of a pet, the Tenant will be charged for the actual expenditures associated with BTHRA performing these services.

- k. In the event of the pet's death, the Tenant will be responsible for the disposing of the pet's remains according to local health regulations. Any expense to dispose of the pet's remains will be the responsibility of the Tenant.

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**NOTE:**

**Any pet that is not fully grown may be measured, periodically, to determine if the pet meets the height requirements. Also, any pet that exceeds the height limit at any time during occupancy will not be an eligible pet and must be removed from BTHRA property.**

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2. Responsible Pet Ownership: Each pet must be maintained responsibly and in accordance with this pet ownership lease addendum and in accordance with all applicable ordinances, state and local public health, animal control, and animal anti-cruelty laws and regulations governing pet ownership. Any waste generated by a pet must be properly and promptly disposed of to avoid any unpleasant and unsanitary odor from being in the unit. Any damage caused by a pet to the inside or outside of the dwelling unit or to BTHRA property will be the sole responsibility of the Tenant.
3. Prohibited Animals: Animals that are considered vicious and/or intimidating will not be allowed as pets. Some examples of animals that have a reputation of a vicious nature are: reptiles, rodents, birds of prey, Rottweilers, Doberman Pinschers, Pit Bulldogs, Chows, and/or any animal that displays vicious behavior. This determination will be made by a BTHRA representative prior to the execution of this lease addendum.
4. A pet shall not disturb, interfere or diminish the peaceful enjoyment of other Tenants. The terms, "disturb, interfere or diminish" shall include, but are not limited to barking, howling, chirping, biting, scratching, and other like activities. The BTHRA has the right to terminate this authorization if a pet disturbs other Tenants under this section of the lease addendum.

If the pet should become destructive, create a nuisance, represent a threat to the safety and security of other people, or create a problem in the area of cleanliness and sanitation, then a BTHRA representative will notify the Tenant, in writing, that the pet must be removed from the premises. The written notice will contain the date by which the pet must be removed and that date must be complied with by the Tenant. The Tenant has the right to request a grievance hearing in accordance with Bristol Tennessee Housing and Redevelopment Authority's grievance procedure. However, if the termination is due to a threat to the safety and security of others, the pet must be removed immediately until the hearing process is completed.

5. The Tenant will not walk or exercise a pet anywhere inside the Edgemont Towers and/or Fort Shelby Towers buildings and will exercise the pet only in areas on the BTHRA's grounds that are marked as an "exercise area". The Tenant is solely responsible for cleaning up the waste of the pet within the dwelling unit and on grounds of the BTHRA's public housing developments. If the pet is taken outside the dwelling unit, it must be on a leash at all times. If there is any visible waste by the pet, it must be disposed of in a plastic bag, securely tied and placed in the garbage. If BTHRA staff is required to clean any waste left by a pet, the Tenant will be charged \$25.00 for the removal of the waste.
6. The Tenant shall have the pet restrained so that maintenance can be performed in the unit. Whenever an inspection, pest exterminating service call or maintenance is scheduled, the Tenant shall either be at home or shall have the pet restrained or caged. If a maintenance person enters a unit where a pet is not restrained, maintenance will not be performed and the Tenant shall be charged a fee of \$25.00. If this same situation occurs again, this authorization may be terminated. The Bristol Tennessee Housing and Redevelopment Authority will not be responsible for any pet, which escapes from the unit due to maintenance, inspections or other activities of the BTHRA, provided proper notice has been given by the BTHRA. When a Tenant requests service via a work order, that will be considered proper notice. In the case of a maintenance emergency that prevents advance notice, the BTHRA will not be responsible for the escape of any pet from the unit.

NO PET SHALL BE ALLOWED IN THE UNIT PRIOR TO THE COMPLETION OF THE TERMS OF THIS PET POLICY. IT SHALL BE A SERIOUS VIOLATION OF THE LEASE FOR ANY TENANT TO HAVE A PET WITHOUT PROPER APPROVAL AND WITHOUT HAVING COMPLIED WITH THE TERMS OF THIS POLICY.

### **RESIDENT ACKNOWLEDGEMENT**

After reading and/or having had this lease addendum read to me, I \_\_\_\_\_ agree to the following:

I agree to abide by the requirements outlined in this addendum for pet ownership and to keep the pet in accordance with the lease addendum.

I am liable for any damage or injury whatsoever caused by the pet and shall pay the Bristol Tennessee Housing and Redevelopment Authority or other applicable party for any damages or injury caused by the pet. I also realize that I should obtain liability insurance for pet ownership and that paying for the insurance is my responsibility.

I agree to accept full responsibility and will not hold liable (indemnify) the Bristol Tennessee Housing and Redevelopment Authority for any claims by or injuries to third parties or their property caused by my pet.

I agree and understand that violating the lease addendum will result in the removal of the pet from the property of the Bristol Tennessee Housing and Redevelopment Authority, and that I may not be allowed to own any type of pet in the future while being a resident of the Bristol Tennessee Housing and Redevelopment Authority.

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Head of Household Signature	Date
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BTHRA Representative Signature	Date
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## **Attachment F**

### **“Resident Survey Action Plan”**

#### **Communications**

The Bristol Tennessee Housing and Redevelopment Authority has restructured the Property Management Department to incorporate Case Managers. In the past, all of our re-certification process was conducted by mail. The present re-certification process includes an interview with each resident (at the office or at their home if circumstances warrant) in order to complete the re-certification process. This interview allows plenty of opportunity for communication as well as allowing the staff to get to know our families. This contact is especially important for the family unit residents because they are in scattered site locations and most communication with them is through written memos. Additionally, the BTHRA staff meets regularly with the Resident Council to share information as well as maintains an active website and e-mail service to further the communication efforts.

#### **Neighborhood Appearance**

The BTHRA has and will continue to appropriate Capital Funds for performing various improvements to enhance the neighborhood appearance of their developments. Such improvements include landscaping, balcony repairs, replacing windows, gutter replacement and exterior painting.

## **Attachment G**

### **“Statement of Progress in Meeting the 5-Year Plan Mission and Goals”**

**Goal – Apply for additional rental vouchers:** The Bristol Tennessee Housing and Redevelopment Authority, (BTHRA) has applied for additional Section 8 vouchers to expand the supply of housing within its jurisdiction.

**Goal – Reduce public housing vacancies:** The BTHRA is currently working on reducing the turnover time for vacated public housing units to lower the vacancy rate of the units as well as improve the PHA’s Management Indicator.

**Goal – Leverage private or other public funds to create additional housing opportunities:** The BTHRA is studying the feasibility to leverage private or other public funds to create additional housing opportunities for its residents.

**Goal – Acquire or build units or development:** The BTHRA is studying the feasibility of acquiring or building additional units of low-income housing. By utilizing Low Income Housing Tax Credits and below market loans through the Federal Home Loan Bank’s Affordable Housing Program, the BTHRA may expand the supply of affordable housing throughout the area without traditional HUD assistance.

**Goal – Improve voucher management:** The BTHRA is currently in the process of improving voucher management functions such as lease up of Section 8 units to improve their SEMAP score.

**Goal – Increase customer satisfaction:** The BTHRA is attempting to keep residents better informed of BTHRA policies and programs as well as overall Authority information through their active Community Cares program and monthly meetings for the residents. Additionally, the BTHRA has established Resident Councils at Fort Shelby and Edgemont Towers with participation from residents of the Family Units equally split between the two Councils to further increase customer satisfaction.

**Goal – Concentrate on efforts to improve specific management functions:** The BTHRA is currently in the process of improving vacant unit turn around time and annual inspections of the dwelling units and system as recommended by HUD.

**Goal – Renovate or modernize public housing units:** The BTHRA has continually upgraded its public housing units through the Comprehensive Grant Program and continues to do so through the Capital Funds Program. All modernization activities are addressed in accordance with need as well as residents’ requests in all developments.



**Goal – Provide voucher mobility and counseling:** The BTHRA is currently providing voucher mobility counseling by conducting briefings with potential landlords and tenants as to the location of units outside areas of poverty or minority concentration.

**Goal – Conduct outreach efforts to potential voucher landlords:** The BTHRA is currently conducting outreach efforts to potential voucher landlords through their Section 8 Program. The outreach effort consists of contacting the potential landlords by telephone and/or mailings notifying them of the availability of voucher recipients.

**Goal – Implement voucher homeownership program:** The BTHRA is currently looking into establishing a Section 8 Homeownership Program pursuant to Section 8(y) of the U.S.H.A. of 1937. The BTHRA anticipates having 25 or fewer participants in the program once implemented.

**Goal – Implement public housing security improvements:** The BTHRA has police officers patrolling Edgemont Tower and is in the process of installing security camera systems in both Fort Shelby and Edgemont Towers. Also, the BTHRA continues to make various site and physical improvements to the developments to alleviate any safety concerns of our residents. Additionally, the BTHRA has a “one strike” and “zero tolerance” policy and performs strict screening of applicants.

**Goal – Increase the number and percentage of employed persons in assisted families:** Under the Authority’s ACOP, the BTHRA has adopted rent policies to support and encourage work. These rent policies include “flat rents”, which are an incentive for families to work without the burden of paying high rents.

**Goal – Provide or attract supportive services to improve assistance recipients’ employability:** The BTHRA offers and provides a variety of services and programs to their residents to achieve self-sufficiency and improve assistance recipients’ employability. These services and programs include the Welfare to Work Program as well as referrals to local non-profit agencies providing supportive services.

**Goal – Provide or attract supportive services to increase independence for the elderly or families with disabilities:** The BTHRA currently has a Community Cares Program, People Place at Fort Shelby and the UETHDA Nutrition Program which provides the elderly and disabled families with the tools they need to eat healthy, stay safe, personal hygiene, etc.

**Goal – Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability:** The BTHRA continues to operate its public housing program and Section 8 programs to ensure equal access to all regardless of race, color, religion, national origin, sex familial status, and disability.

**Goal – Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability:** The BTHRA's operations and management, inspections, maintenance and modernization programs are spread equally among all developments.

**Goal - Promote energy efficiency practices and products when performing rehabilitation, repair and replacement in public housing developments:** The BTHRA will incorporate, when applicable, Energy Star Program qualified products and practices when performing rehabilitation, repair and replacement in their public housing developments.

## **Attachment H**

### **“Resident Membership of the PHA Governing Board”**

As required by the QHWRA through regulations published in the October 21, 1999 Federal Register, the BTHRA currently has a resident serving on the Board of Commissioners. The resident was appointed by the Mayor of Bristol, Tennessee and is identified as Mr. Gerald Holmes, 100 Ash Street, Apt. 9H, Bristol, Tennessee 37620. Mr. Holmes was appointed to the Board of Commissioners in March 2004 for a five-year term which expires March 2009.

**Attachment I**  
**“Membership of the Resident Advisory Board”**

David Ringley	400 Shelby St., Apt. #702	Bristol, TN
Catherine Carpenter	400 Shelby St., Apt. #901	Bristol, TN
Peggy Sneed	400 Shelby St., Apt. #508	Bristol, TN
Susan Boone	400 Shelby St., Apt. #306	Bristol, TN
Brenda Harmon	400 Shelby St., Apt. #308	Bristol, TN
Diane Cotter	100 Ash Street, Apt. #7H	Bristol, TN
Pat Felty	100 Ash Street, Apt. #9J	Bristol, TN
Pat Martin	100 Ash Street, Apt. #9D	Bristol, TN
Ida Broce	100 Ash Street, Apt. #5J	Bristol, TN
Arther Hallman	100 Ash Street, Apt. #10G	Bristol, TN
Mary Blackburn	1657 Virginia Avenue	Bristol, TN
Kimberly Humphery	1663 Virginia Avenue	Bristol, TN
Cathy Blevins	1216 Maryland Avenue	Bristol, TN

## **Attachment J**

### **“VAWA Policies for Public Housing and Section 8”**

#### **Amendment**

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Violence Against Women and Justice Department Reauthorization Act 2005  
Form HUD-50066 Certification of Domestic Violence, Dating Violence, or  
Stalking

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**The Violence Against Women and Justice Department Reauthorization Act (VAWA) of 2005 protects tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them. Applicants are also protected from denial of assistance as stated in the VAWA.**

In general, the law provides in part that criminal activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of a tenant’s household or any guest or other person under the tenant’s control, shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant’s family is the victim or threatened victim of that abuse. The law also provides that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be construed as serious or repeated violations of the lease by the victim or threatened victim of that violence and will not be “good cause” for termination of the assistance, tenancy, or occupancy rights of a victim of such violence.

#### **Changes to the Public Housing ACOP**

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##### **1. Notification to Applicants:**

The BTHRA will provide all applicants to the Public Housing program with notification of their protections and rights under the Violence Against Women Reauthorization Act of 2005 (VAWA) at the time they request an application for housing assistance.

The notice will explain the protections afforded under the law, inform each applicant of BTHRA confidentiality requirements, and provide contact information for local victim advocacy groups or service providers.

The BTHRA will also include in all notices of denial, a statement explaining the protection against denial provided by VAWA.

##### **2. Notification to Participants:**

The BTHRA will provide all participants with notification of their protections and rights under the VAWA at the time of admission and at annual reexamination.

The notice will explain the protections afforded under the law, inform the participant of BTHRA confidentiality requirements, and provide contact information for local victim advocacy groups or service providers.

The BTHRA will also include in all termination notices a statement explaining the protection against denial provided by VAWA.

### 3. Terminating the Assistance of Domestic Violence, Dating Violence, or Stalking Victims and Perpetrators

The VAWA provides that “criminal activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of a tenant’s household or any guest or other person under the tenant’s control shall not be a cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant’s family is the victim of that domestic violence, dating violence, or stalking.”

VAWA also gives BTHRA the authority to “terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant.”

VAWA does not limit the authority of BTHRA to terminate the assistance of any participant if BTHRA “can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if that tenant is not evicted or terminated from assistance”.

#### Victim Documentation

When a participant family is facing assistance termination because of the actions of a participant, household member, guest, or other person under the participant’s control and a participant or immediate family member of the participant’s family claims that she or he is the victim of such actions and that the actions are related to domestic violence, dating violence, or stalking, the BTHRA will require the individual to submit documentation affirming that claim.

The documentation must include two elements:

1. A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking (**HUD form 50066 “Certification of Domestic Violence, Dating Violence, or Stalking”**), as required by the provisions of Sections 606 and 607 of the Violence Against Women and Justice Department Reauthorization Act of 2005 (VAWA), Public Law 109-162, **AND**
2. One of the following:
  - a) a police or court record documenting the actual or threatened abuse, **or**
  - b) a statement signed by an employee, agent, or volunteer of a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The required certification and supporting documentation must be submitted to the BTHRA within fourteen (14) business days after the BTHRA issues their written request. The fourteen (14)-day deadline may be extended at BTHRA’s discretion. If the individual does not provide the required certification and supporting documentation within fourteen (14) business days, or the approved extension period, the BTHRA may proceed with assistance termination.

If the BTHRA can demonstrate an actual and imminent threat to other participants or those employed at or providing service to the property if the participant’s tenancy is not terminated, the BTHRA will bypass the standard process and proceed with the immediate termination of the family’s assistance.

### **Terminating the Assistance of a Domestic Violence Perpetrator**

When the actions of a participant or other family member result in a BTHRA decision to terminate the family's assistance and another family member claims that the actions involve criminal acts of physical violence against family members or others, the BTHRA will request that the victim submit the above required certification and supporting documentation in accordance with the stated time frame. If the certification and supporting documentation are submitted within the required time frame, or any approved extension period, the BTHRA will terminate the perpetrator's assistance. If the victim does not provide the certification and supporting documentation, as required, the BTHRA will proceed with termination of the family's assistance.

If the BTHRA can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if the participant's tenancy is not terminated, the BTHRA will bypass the standard process and proceed with the immediate termination of the family's assistance.

### **BTHRA Confidentiality Requirements**

All information provided to the BTHRA regarding domestic violence, dating violence, or stalking, including the fact that an individual is a victim of such violence or stalking, must be retained in confidence and may neither be entered into any shared data base nor provided to any related entity, except to the extent that the disclosure (a) is requested or consented to by the individual in writing, (b) is required for use in an eviction proceeding, or (c) is otherwise required by applicable law.

The HUD-approved certification form provides notice to the tenant of the confidentiality of the form and the limits thereof.

#### **4. Prohibition Against Denial of Assistance to Victims of Domestic Violence, Dating Violence, and Stalking**

The BTHRA acknowledges that a victim of domestic violence, dating violence, or stalking may have an unfavorable history that would warrant denial under the BTHRA's policies. Therefore, if the BTHRA makes a determination to deny admission to an applicant family, the BTHRA will include in its notice of denial a statement of the protection against denial provided by VAWA and will offer the applicant the opportunity to provide documentation affirming that the cause of the unfavorable history is that a member of the applicant family is or has been a victim of domestic violence, dating violence, or stalking.

The documentation must include two elements:

1. A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking, (**HUD form 50066 "Certification of Domestic Violence, Dating Violence, or Stalking"**), as required by the provisions of Sections 606 and 607 of the Violence Against Women and Justice Department Reauthorization Act of 2005 (VAWA), Public Law 109-162, **AND**
2. One of the following:
  - a) a police or court record documenting the actual or threatened abuse, **or**
  - b) a statement signed by an employee, agent, or volunteer of a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The applicant must submit the required documentation with her or his request for an informal review or must request an extension in writing at that time. If the applicant so requests, the BTHRA will grant an extension of ten (10) business days, and will postpone scheduling the applicant's information review until after it has received the documentation or the extension period has elapsed. If after reviewing the documentation provided by the applicant the BTHRA determines the family is eligible for assistance, no information review will be scheduled and the BTHRA will proceed with admission of the applicant family.

#### **Perpetrator Removal or Documentation of Rehabilitation**

In cases where an applicant family includes the perpetrator as well as the victim of domestic violence, dating violence, or stalking, the BTHRA will proceed as above but will require, in addition, either (a) that the perpetrator be removed from the applicant household and not reside in the assisted housing unit or (b) that the family provide documentation that the perpetrator has successfully completed, or is successfully undergoing, rehabilitation or treatment.

If the family elects the second option, the documentation must be signed by an employee or agent of a domestic violence service provider or by a medical or other knowledgeable professional from who the perpetrator has sought or is receiving assistance in addressing the abuse. The signer must attest under penalty of perjury to his or her belief that the rehabilitation was successfully completed or is progressing successfully. The victim and perpetrator must also sign or attest to the documentation. This additional documentation must be submitted within the same time frame as the documentation required above from the victim.

#### **5. Informal Hearings for Participants**

Circumstances for which the BTHRA must give a participant family an opportunity for an informal hearing are as follows:

- a determination to deny admission based on an unfavorable history that may be the result of domestic violence, dating violence, or stalking.

#### **6. Nondiscrimination**

Add to section:

Violence Against Women Reauthorization Act of 2005 (VAWA)

#### **7. Definition of Terms**

**Domestic Violence:** Includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim share a child in common, by a person who is cohabitated with or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

**Dating Violence:** Violence committed by a person:

- (A) who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- (B) where the existence of such a relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; and (iii) the frequency of interaction between the persons involved in the relationship.

**Stalking:** to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or to place under surveillance with the intent to kill, injure, harass, or intimidate



another person; and in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to (i) that person; (ii) a member of the immediate family of that person; or (iii) the spouse or intimate partner of that person.

**Immediate Family Member:** a spouse, parent, brother or sister, or child of the person, or an individual to whom that person stands in loco parentis (in place of a parent); or any other person living in the household of that person and related to that person by blood or marriage.

This Amendment to the Public Housing Admissions and Continued Occupancy Policy (ACOP) is in accordance with the Department of Housing and Urban Development's PIH Notice 2006-42, issued 12/27/2006.

## Amendment

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### Violence Against Women and Justice Department Reauthorization Act 2005 Form HUD-50066 Certification of Domestic Violence, Dating Violence, or Stalking

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**The Violence Against Women and Justice Department Reauthorization Act (VAWA) of 2005 protects tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them. Applicants are also protected from denial of assistance as stated in the VAWA.**

In general, the law provides in part that criminal activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, shall not be cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant's family is the victim or threatened victim of that abuse. The law also provides that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be construed as serious or repeated violations of the lease by the victim or threatened victim of that violence and will not be "good cause" for termination of the assistance, tenancy, or occupancy rights of a victim of such violence.

### Changes to the Housing Choice Voucher Admin Plan

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#### **1. Notification to Applicants:**

The BTHRA will provide all applicants to the Housing Choice Voucher Program with notification of their protections and rights under the Violence Against Women Reauthorization Act of 2005 (VAWA) at the time they request an application for housing assistance.

The notice will explain the protections afforded under the law, inform each applicant of BTHRA confidentiality requirements, and provide contact information for local victim advocacy groups or service providers.

The BTHRA will also include in all notices of denial, a statement explaining the protection against denial provided by VAWA.

#### **2. Notification to Participants:**

The BTHRA will provide all participants with notification of their protections and rights under the VAWA at the time of admission and at annual reexamination.

The notice will explain the protections afforded under the law, inform the participant of BTHRA confidentiality requirements, and provide contact information for local victim advocacy groups or service providers.

The BTHRA will also include in all termination notices a statement explaining the protection against denial provided by VAWA.

#### **3. Terminating the Assistance of Domestic Violence, Dating Violence, or Stalking Victims and Perpetrators**

The VAWA provides that "criminal activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of a tenant's household or any guest or other person under the tenant's control shall not be a cause for termination of assistance, tenancy, or

occupancy rights if the tenant or an immediate member of the tenant's family is the victim of that domestic violence, dating violence, or stalking."

VAWA also gives BTHRA the authority to "terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant."

VAWA does not limit the authority of BTHRA to terminate the assistance of any participant if BTHRA "can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if that tenant is not evicted or terminated from assistance".

### **Victim Documentation**

When a participant family is facing assistance termination because of the actions of a participant, household member, guest, or other person under the participant's control and a participant or immediate family member of the participant's family claims that she or he is the victim of such actions and that the actions are related to domestic violence, dating violence, or stalking, the BTHRA will require the individual to submit documentation affirming that claim.

The documentation must include two elements:

1. A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking (**HUD form 50066 "Certification of Domestic Violence, Dating Violence, or Stalking"**), as required by the provisions of Sections 606 and 607 of the Violence Against Women and Justice Department Reauthorization Act of 2005 (VAWA), Public Law 109-162, **AND**
2. One of the following:
  - a. a police or court record documenting the actual or threatened abuse, **or**
  - b. a statement signed by an employee, agent, or volunteer of a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The required certification and supporting documentation must be submitted to the BTHRA within fourteen (14) business days after the BTHRA issues their written request. The fourteen (14)-day deadline may be extended at BTHRA's discretion. If the individual does not provide the required certification and supporting documentation within fourteen (14) business days, or the approved extension period, the BTHRA may proceed with assistance termination.

If the BTHRA can demonstrate an actual and imminent threat to other participants or those employed at or providing service to the property if the participant's tenancy is not terminated, the BTHRA will bypass the standard process and proceed with the immediate termination of the family's assistance.

### **Terminating the Assistance of a Domestic Violence Perpetrator**

When the actions of a participant or other family member result in a BTHRA decision to terminate the family's assistance and another family member claims that the actions involve criminal acts of physical violence against family members or others, the BTHRA will request that the victim submit the above required certification and supporting documentation in accordance with the stated time frame. If the certification and supporting documentation are submitted within the required time frame, or any approved extension period, the BTHRA will

terminate the perpetrator's assistance. If the victim does not provide the certification and supporting documentation, as required, the BTHRA will proceed with termination of the family's assistance.

If the BTHRA can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if the participant's tenancy is not terminated, the BTHRA will bypass the standard process and proceed with the immediate termination of the family's assistance.

#### **BTHRA Confidentiality Requirements**

All information provided to the BTHRA regarding domestic violence, dating violence, or stalking, including the fact that an individual is a victim of such violence or stalking, must be retained in confidence and may neither be entered into any shared data base nor provided to any related entity, except to the extent that the disclosure (a) is requested or consented to by the individual in writing, (b) is required for use in an eviction proceeding, or (c) is otherwise required by applicable law.

The HUD-approved certification form provides notice to the tenant of the confidentiality of the form and the limits thereof.

#### **4. Prohibition Against Denial of Assistance to Victims of Domestic Violence, Dating Violence, and Stalking**

The BTHRA acknowledges that a victim of domestic violence, dating violence, or stalking may have an unfavorable history that would warrant denial under the BTHRA's policies. Therefore, if the BTHRA makes a determination to deny admission to an applicant family, the BTHRA will include in its notice of denial a statement of the protection against denial provided by VAWA and will offer the applicant the opportunity to provide documentation affirming that the cause of the unfavorable history is that a member of the applicant family is or has been a victim of domestic violence, dating violence, or stalking.

The documentation must include two elements:

1. A signed statement by the victim that provides the name of the perpetrator and certifies that the incidents in question are bona fide incidents of actual or threatened domestic violence, dating violence, or stalking, (**HUD form 50066 "Certification of Domestic Violence, Dating Violence, or Stalking"**), as required by the provisions of Sections 606 and 607 of the Violence Against Women and Justice Department Reauthorization Act of 2005 (VAWA), Public Law 109-162, **AND**
2. One of the following:
  - a) a police or court record documenting the actual or threatened abuse, **or**
  - c) a statement signed by an employee, agent, or volunteer of a victim service provider; an attorney; a medical professional; or another knowledgeable professional from whom the victim has sought assistance in addressing the actual or threatened abuse. The professional must attest under penalty of perjury that the incidents in question are bona fide incidents of abuse, and the victim must sign or attest to the statement.

The applicant must submit the required documentation with her or his request for an informal review or must request an extension in writing at that time. If the applicant so requests, the BTHRA will grant an extension of ten (10) business days, and will postpone scheduling the applicant's information review until after it has received the documentation or the extension period has elapsed. If after reviewing the documentation provided by the applicant the BTHRA determines the family is eligible for assistance, no information review will be scheduled and the BTHRA will proceed with admission of the applicant family.

### **Perpetrator Removal or Documentation of Rehabilitation**

In cases where an applicant family includes the perpetrator as well as the victim of domestic violence, dating violence, or stalking, the BTHRA will proceed as above but will require, in addition, either (a) that the perpetrator be removed from the applicant household and not reside in the assisted housing unit or (b) that the family provide documentation that the perpetrator has successfully completed, or is successfully undergoing, rehabilitation or treatment.

If the family elects the second option, the documentation must be signed by an employee or agent of a domestic violence service provider or by a medical or other knowledgeable professional from who the perpetrator has sought or is receiving assistance in addressing the abuse. The signer must attest under penalty of perjury to his or her belief that the rehabilitation was successfully completed or is progressing successfully. The victim and perpetrator must also sign or attest to the documentation. This additional documentation must be submitted within the same time frame as the documentation required above from the victim.

### **5. Informal Hearings for Participants**

Circumstances for which the BTHRA must give a participant family an opportunity for an informal hearing are as follows:

- a determination to deny admission based on an unfavorable history that may be the result of domestic violence, dating violence, or stalking.

### **6. Nondiscrimination**

Add to section:

Violence Against Women Reauthorization Act of 2005 (VAWA)

### **7. Definition of Terms**

**Domestic Violence:** Includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim share a child in common, by a person who is cohabitated with or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

**Dating Violence:** Violence committed by a person:

- (C) who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- (D) where the existence of such a relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship; (ii) the type of relationship; and (iii) the frequency of interaction between the persons involved in the relationship.

**Stalking:** to follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or to place under surveillance with the intent to kill, injure, harass, or intimidate another person; and in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to (i) that person; (ii) a member of the immediate family of that person; or (iii) the spouse or intimate partner of that person.

**Immediate Family Member:** a spouse, parent, brother or sister, or child of the person, or an individual to whom that person stands in loco parentis (in place of a parent); or any other person living in the household of that person and related to that person by blood or marriage.

This Amendment to the Housing Choice Voucher Administration Plan (ADMIN PLAN) is in accordance with the Department of Housing and Urban Development's PIH Notice 2006-42, issued 12/27/2006.

**Attachment K**  
**“Section 8 Homeownership Capacity Statement”**

Bristol Tennessee Housing & Redevelopment Authority desires to undertake a Section 8 Homeownership Program. We believe we have the capacity to administer this program due to the following reasons:

First, we currently administer 200 units of Section 8 Tenant-Based Assistance with over 12 years of experience.

Second, two local agencies have expressed interest in administering financial & home ownership counseling for qualified voucher holders. Partnering with these agencies will enable the BTHRA to administer a program without adding staff or other expenses.

Third, a review in 2008 of the Section 8 program participant's income level indicated 39 families that meet the minimum threshold for homeownership eligibility.

Fourth, Bristol Tennessee Housing & Redevelopment Authority will work in partnership with the local legal services office on this program. BTHRA will make the program known to potential homeowners and Legal Services will provide counseling.

Fifth, the BTHRA has promoted our staff accountant to “Finance & Special Programs Manager.” This position will provide oversight if the BTHRA were to be approved for a Home Ownership program.

Lastly, both the BTHRA Board of Commissioners & the Bristol TN City Council have pledged their support for a Home Ownership program. Area building contractors and lending institutions are also interested in assisting participants.

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part I: Summary**

<b>PHA Name:</b> Bristol Tennessee Housing and Redevelopment Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: TN37P06650108 Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> 2008	
<input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:    )</b> <input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0			
2	1406 Operations	41,229			
3	1408 Management Improvements	76,000			
4	1410 Administration	41,229			
5	1411 Audit	0			
6	1415 Liquidated Damages	0			
7	1430 Fees and Costs	27,958			
8	1440 Site Acquisition	0			
9	1450 Site Improvement	0			
10	1460 Dwelling Structures	7,500			
11	1465.1 Dwelling Equipment—Nonexpendable	6,000			
12	1470 Nondwelling Structures	186,376			
13	1475 Nondwelling Equipment	26,000			
14	1485 Demolition	0			
15	1490 Replacement Reserve	0			
16	1492 Moving to Work Demonstration	0			
17	1495.1 Relocation Costs	0			
18	1499 Development Activities	0			
19	1501 Collateralization or Debt Service	0			
20	1502 Contingency	0			
21	Amount of Annual Grant: (sum of lines 2 – 20)	412,292			
22	Amount of line 21 Related to LBP Activities	0			



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part I: Summary**

<b>PHA Name:</b> Bristol Tennessee Housing and Redevelopment Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: TN37P06650108 Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> 2008	
<input checked="" type="checkbox"/> <b>Original Annual Statement</b> <input type="checkbox"/> <b>Reserve for Disasters/ Emergencies</b> <input type="checkbox"/> <b>Revised Annual Statement (revision no:     )</b>					
<input type="checkbox"/> <b>Performance and Evaluation Report for Period Ending:</b> <input type="checkbox"/> <b>Final Performance and Evaluation Report</b>					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
23	Amount of line 21 Related to Section 504 compliance	0			
24	Amount of line 21 Related to Security – Soft Costs	0			
25	Amount of Line 21 Related to Security – Hard Costs	0			
26	Amount of line 21 Related to Energy Conservation Measures	0			

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Bristol Tennessee Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: <b>TN37P06650108</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2008</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
TN066000001P								
Development								
TN066-001								
Family Units								
Operations	Operating Expense	1406	1	16,771				
Management	Additional Security	1408	1	20,339				
Improvements	Community Care Worker	1408	1	13,000				
Administration	Central Office Management Fee	1410	1	16,771				
Fees and Costs	A/E Fees	1430	1	2,000				
	Consultant Fees for Env. Review	1430	1	750				
Dwelling	Ranges/Refrigerators	1465.1	Dev-wide	3,000				
Equipment								

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Bristol Tennessee Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: TN37P06650108 Replacement Housing Factor Grant No:				Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
SUBTOTAL				\$72,631				
TN066000001P								
TN066000002P								
Developments	Paint Unit Balconies (ET)	1460	Dev-wide	7,500				
TN066-002	Elevator Upgrades (ET)	1470	2	178,876				
Edgemont Tower and TN066-003	Paint Interior Hallways	1470	Dev-wide	7,500				
Fort Shelby Tower								
Operations	Operating Expense	1406	1	24,458				
Management	Additional Security	1408	1	29,661				
Improvements	Community Care Worker	1408	1	13,000				
Administration	Central Office Management Fee	1410	1	24,458				
Fees and Costs	A/E Fees	1430	1	24,458				
	Consultant Fees for Env. Review	1430	1	750				

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

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**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

<b>PHA Name:</b> <b>Bristol Tennessee Housing and Redevelopment Authority</b>			<b>Grant Type and Number</b> Capital Fund Program No: <b>TN37P06650108</b> Replacement Housing Factor No:			<b>Federal FY of Grant:</b> <b>2008</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TN066000001P							
Development	06/12/10			06/12/12			
TN066-001							
Family Units							
Operations	06/12/10			06/12/12			
Management	06/12/10			06/12/12			
Improvements							
Administration	06/12/10			06/12/12			
Fees and Costs	06/12/10			06/12/12			
Dwelling Equipment	06/12/10			06/12/12			

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

<b>PHA Name:</b> <b>Bristol Tennessee Housing and Redevelopment Authority</b>			<b>Grant Type and Number</b> Capital Fund Program No: <b>TN37P06650108</b> Replacement Housing Factor No:			<b>Federal FY of Grant:</b> <b>2008</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TN066000002P							
Developments	06/12/10			06/12/12			
TN066-002							
Edgemont Tower							
and TN066-003							
Fort Shelby							
Operations	06/12/10			06/12/12			
Management	06/12/10			06/12/12			
Improvements							
Administration	06/12/10			06/12/12			
Fees and Costs	06/12/10			06/12/12			
Dwelling Equipment	06/12/10			06/12/12			
Nondwelling Equipment	06/12/10			06/12/12			

## Capital Fund Program Five-Year Action Plan

### Part I: Summary

PHA Name <b>Bristol Tennessee Housing and Redevelopment Authority</b>				<input checked="" type="checkbox"/> <b>Original 5-Year Plan</b> <input type="checkbox"/> <b>Revision No:</b>	
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: 2009 PHA FY: 10/2009	Work Statement for Year 3 FFY Grant: 2010 PHA FY: 10/2010	Work Statement for Year 4 FFY Grant: 2011 PHA FY: 10/2011	Work Statement for Year 5 FFY Grant: 2012 PHA FY: 10/2012
	Annual Statement				
TN066000001P & 2P		215,550	205,550	225,550	205,550
TN066000001P		0	0	76,742	140,000
TN066000002P		196,742	206,742	110,000	66,742
CFP Funds Listed for 5-year planning		412,292	412,292	412,292	412,292
Replacement Housing Factor Funds		0	0	0	0

**Capital Fund Program Five-Year Action Plan**  
**Part II: Supporting Pages—Work Activities**

Activities for Year 1	Activities for Year : <u>2</u> FFY Grant: 2009 PHA FY: 10/2009			Activities for Year: <u>3</u> FFY Grant: 2010 PHA FY: 10/2010		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	TN066000001P & 2P	Operations	79,750	TN066000001P & 2P	Operations	79,750
Annual	TN066000001P & 2P	Mgmt. Improvements	17,500	TN066000001P & 2P	Mgmt. Improvements	17,500
Statement	TN066000001P & 2P	Administrative	39,800	TN066000001P & 2P	Administrative	39,800
	TN066000001P & 2P	Fees and Costs	68,500	TN066000001P & 2P	Fees and Costs	68,500
	TN066000001P & 2P	Dwelling Equipment	10,000	TN066000002P	Landscaping (ET & FS)	20,000
	TN066000002P	Sewerline Replacement (ET)	196,742	TN066000002P	Exterior Painting (ET & FS)	15,000
				TN066000002P	Interior Painting (ET & FS)	15,000
				TN066000002P	Elevator Upgrades (ET)	151,742
				TN066000002P	Swipe Card System (FS)	5,000



## Capital Fund Program Five-Year Action Plan

### Part II: Supporting Pages—Work Activities

Activities for Year : <u>4</u> FFY Grant: 2011 PHA FY: 10/2011			Activities for Year: <u>5</u> FFY Grant: 2012 PHA FY: 10/2012		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
TN066000001P & 2P	Operations	79,750	TN066000001P & 2P	Operations	79,750
TN066000001P & 2P	Mgmt. Improvements	17,500	TN066000001P & 2P	Mgmt. Improvements	17,500
TN066000001P & 2P	Administrative	39,800	TN066000001P & 2P	Administrative	39,800
TN066000001P & 2P	Fees and Costs	68,500	TN066000001P & 2P	Fees and Costs	68,500
TN066000001P & 2P	Nondwelling Equipment	20,000	TN066000001P	Landscaping/Tree Removal	10,000
TN066000001P	Waterlines	36,742	TN066000001P	Driveways/Sidewalks	20,000
TN066000001P	Kitchen Renovations	20,000	TN066000001P	Install Air Conditioning	20,000
TN066000001P	Bathroom Renovations	20,000	TN066000001P	Building Exterior	20,000
TN066000002P	PA System (ET & FS)	50,000	TN066000001P	Handicap Improvements	20,000
TN066000002P	Install Vestibule (ET & FS)	60,000	TN066000001P	Gutters	10,000
			TN066000001P	Windows/Shutters	20,000
			TN066000001P	Storm Doors	10,000
			TN066000001P	Porch Repairs	10,000
			TN066000002P	HVAC (ET & FS)	6,000
			TN066000002P	Roofing (FS)	40,742
			TN066000002P	Flooring (FS)	20,000
Total CFP Estimated Cost		\$412,292			\$412,292

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part I: Summary</b>					
<b>PHA Name:</b> Bristol Tennessee Housing and Redevelopment Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: TN37P06650107 Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/08 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0.00		0.00	0.00
2	1406 Operations	82,192.00		0.00	0.00
3	1408 Management Improvements	17,500.00	20,500.00	0.00	0.00
4	1410 Administration	41,096.00		0.00	0.00
5	1411 Audit	0.00		0.00	0.00
6	1415 Liquidated Damages	0.00		0.00	0.00
7	1430 Fees and Costs	48,100.00		0.00	0.00
8	1440 Site Acquisition	0.00		0.00	0.00
9	1450 Site Improvement	15,000.00		0.00	0.00
10	1460 Dwelling Structures	83,252.00		16,062.56	16,062.56
11	1465.1 Dwelling Equipment—Nonexpendable	10,000.00		1,092.93	1,092.93
12	1470 Nondwelling Structures	63,824.00	60,824.00	14,200.00	14,200.00
13	1475 Nondwelling Equipment	50,000.00		0.00	0.00
14	1485 Demolition	0.00		0.00	0.00
15	1490 Replacement Reserve	0.00		0.00	0.00
16	1492 Moving to Work Demonstration	0.00		0.00	0.00
17	1495.1 Relocation Costs	0.00		0.00	0.00
18	1499 Development Activities	0.00		0.00	0.00
19	1501 Collateralization or Debt Service	0.00		0.00	0.00
20	1502 Contingency	0.00		0.00	0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	410,964.00		31,355.49	31,355.49
22	Amount of line 21 Related to LBP Activities	0.00		0.00	0.00

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part I: Summary**

<b>PHA Name:</b> Bristol Tennessee Housing and Redevelopment Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: TN37P06650107 Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> 2007	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/08				<input type="checkbox"/> Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
23	Amount of line 21 Related to Section 504 compliance	0.00		0.00	0.00
24	Amount of line 21 Related to Security – Soft Costs	0.00		0.00	0.00
25	Amount of Line 21 Related to Security – Hard Costs	0.00		0.00	0.00
26	Amount of line 21 Related to Energy Conservation Measures	0.00		0.00	0.00

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Bristol Tennessee Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: <b>TN37P06650107</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2007</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
TN066000001P								
Development	Sidewalk Repairs	1450	Dev-wide	13,000.00		0.00	0.00	09/08
TN066-001	Window Replacement	1460	Dev-wide	32,052.00		0.00	0.00	09/08
Family Units	Lockset/Key Replacement	1460	Dev-wide	20,000.00		16,062.56	16,062.56	In Progress
	Install Smoke Detectors	1460	Dev-wide	3,400.00		0.00	0.00	09/08
	Clerk-of-Works	1460	1	13,900.00		0.00	0.00	09/08
Operations	Operating Expense	1406	1	33,272.00		0.00	0.00	09/08
Management	Computer Upgrades	1408	1	5,000.00	0.00	0.00	0.00	Deleted
Improvements	Community Care Worker/VISTA	1408	1	3,750.00		0.00	0.00	09/08
Administration	Employee Benefits	1410	1	0.00		0.00	0.00	Deleted
	Advertising	1410	1	0.00		0.00	0.00	Deleted
	Central Office Management Fee	1410	1	16,636.00		0.00	0.00	09/08
Fees and Costs	A/E Fees	1430	1	19,750.00	24,750.00	0.00	0.00	09/08
	Clerk-of-Works	1430	1	0.00		0.00	0.00	Deleted
	Environmental Review	1430	1	600.00		0.00	0.00	09/08

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Bristol Tennessee Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: <b>TN37P06650107</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2007</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Dwelling	Ranges/Refrigerators	1465.1	Dev-wide	5,000.00		0.00	0.00	09/08
Equipment								
SUBTOTAL								
TN066000001P				\$166,360.00		16,062.56	16,062.56	
TN066000002P								
Developments	Sidewalk Repairs (ET and FS)	1450	Dev-wide	2,000.00		0.00	0.00	09/08
TN066-002	Sewerline Replacement (ET)	1460	Dev-wide	0.00		0.00	0.00	Deleted
Edgemont Tower	Clerk-of-Works (ET and FS)	1460	1	13,900.00		0.00	0.00	09/08
and TN066-003	Replace Canopy Roofs (ET and FS)	1470	Dev-wide	3,813.87	813.87	0.00	0.00	09/08
Fort Shelby	Office Renovations (ET)	1470	Dev-wide	20,000.00		0.00	0.00	09/08
Tower	Elevator Upgrades (ET)	1470	Dev-wide	20,010.13		0.00	0.00	09/08
	Swipe Card System (FS)	1470	Dev-wide	20,000.00		14,200.00	14,200.00	In Progress
Operations	Operating Expense	1406	1	48,920.00		0.00	0.00	09/08
Management	Computer Upgrades	1408	1	5,000.00	0.00	0.00	0.00	Deleted
Improvements	Community Care Worker/VISTA	1408	1	3,750.00	16,750.00	0.00	0.00	09/08

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Bristol Tennessee Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: <b>TN37P06650107</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2007</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Administration	Employee Benefits	1410	1	0.00		0.00	0.00	Deleted
	Advertising	1410	1	0.00		0.00	0.00	Deleted
	Central Office Management Fee	1410	1	24,460.00		0.00	0.00	09/08
Fees and Costs	A/E Fees	1430	1	20,150.00	15,150.00	0.00	0.00	09/08
	Clerk-of-Works	1430	1	0.00		0.00	0.00	Deleted
	Sprinkler System Testing	1430	2	7,000.00		0.00	0.00	09/08
	Environmental Review	1430	1	600.00		0.00	0.00	09/08
Dwelling	Ranges/Refrigerators	1465.1	Dev-wide	5,000.00		1,092.93	1,092.93	In Progress
Equipment								
Nondwelling	Video Surveillance Cameras (ET and FS)	1475	2	50,000.00		0.00	0.00	09/08
Equipment								
SUBTOTAL								
TN066000002P				\$244,604.00		15,292.93	15,292.93	
TOTAL				\$410,964.00		31,355.49	31,355.49	

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

<b>PHA Name:</b> <b>Bristol Tennessee Housing and Redevelopment Authority</b>			<b>Grant Type and Number</b> Capital Fund Program No: <b>TN37P06650107</b> Replacement Housing Factor No:			<b>Federal FY of Grant:</b> <b>2007</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TN066000001P							
Development	09/12/09			09/12/11			
TN066-001							
Family Units							
Operations	09/12/09			09/12/11			
Management	09/12/09			09/12/11			
Improvements							
Administration	09/12/09			09/12/11			
Fees and Costs	09/12/09			09/12/11			
Dwelling Equipment	09/12/09			09/12/11			

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

<b>PHA Name:</b> <b>Bristol Tennessee Housing and Redevelopment Authority</b>			<b>Grant Type and Number</b> Capital Fund Program No: <b>TN37P06650107</b> Replacement Housing Factor No:			<b>Federal FY of Grant:</b> <b>2007</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TN066000002P							
Developments	09/12/09			09/12/11			
TN066-002							
Edgemont Tower							
and TN066-003							
Fort Shelby							
Operations	09/12/09			09/12/11			
Management	09/12/09			09/12/11			
Improvements							
Administration	09/12/09			09/12/11			
Fees and Costs	09/12/09			09/12/11			
Dwelling Equipment	09/12/09			09/12/11			
Nondwelling Equipment	09/12/09			09/12/11			



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part I: Summary**

<b>PHA Name:</b> Bristol Tennessee Housing and Redevelopment Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN37P06650106</b> Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> <b>2006</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/08 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0.00		0.00	0.00
2	1406 Operations	77,100.00		77,100.00	77,100.00
3	1408 Management Improvements	13,000.00		13,000.00	6,426.68
4	1410 Administration	12,800.00		12,800.00	5,562.50
5	1411 Audit	0.00		0.00	0.00
6	1415 Liquidated Damages	0.00		0.00	0.00
7	1430 Fees and Costs	64,500.00		64,500.00	24,416.24
8	1440 Site Acquisition	0.00		0.00	0.00
9	1450 Site Improvement	50,000.00		50,000.00	1,774.92
10	1460 Dwelling Structures	0.00		0.00	0.00
11	1465.1 Dwelling Equipment—Nonexpendable	10,000.00		10,000.00	6,154.00
12	1470 Nondwelling Structures	118,648.00		118,648.00	490.62
13	1475 Nondwelling Equipment	53,000.00		53,000.00	4,580.00
14	1485 Demolition	0.00		0.00	0.00
15	1490 Replacement Reserve	0.00		0.00	0.00
16	1492 Moving to Work Demonstration	0.00		0.00	0.00
17	1495.1 Relocation Costs	0.00		0.00	0.00
18	1499 Development Activities	0.00		0.00	0.00
19	1501 Collateralization or Debt Service	0.00		0.00	0.00
20	1502 Contingency	0.00		0.00	0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	399,048.00		399,048.00	126,504.96

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part I: Summary**

<b>PHA Name:</b> Bristol Tennessee Housing and Redevelopment Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN37P06650106</b> Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> <b>2006</b>	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>03/31/08</b> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
22	Amount of line 21 Related to LBP Activities	0.00		0.00	0.00
23	Amount of line 21 Related to Section 504 compliance	0.00		0.00	0.00
24	Amount of line 21 Related to Security – Soft Costs	0.00		0.00	0.00
25	Amount of Line 21 Related to Security – Hard Costs	0.00		0.00	0.00
26	Amount of line 21 Related to Energy Conservation Measures	0.00		0.00	0.00

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Bristol Tennessee Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: <b>TN37P06650106</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2006</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
TN066-002	Seal/Stripe Parking Area	1450	Dev-wide	30,000.00		30,000.00	0.00	In Progress
Edgemont Tower	Sewerline Replacement	1470	Dev-wide	97,648.00		97,648.00	0.00	In Progress
	HVAC Replacement	1475	Dev-wide	18,000.00		18,000.00	4,580.00	In Progress
TN066-003	Seal/Stripe Parking Area	1450	Dev-wide	20,000.00		20,000.00	1,774.92	In Progress
Fort Shelby	Additional Laundry Rooms	1470	Dev-wide	21,000.00		21,000.00	490.62	In Progress
Tower	HVAC Replacement	1475	Dev-wide	18,000.00		18,000.00	0.00	In Progress
PHA-WIDE Operations	Operating Expense	1406	1	77,100.00		77,100.00	77,100.00	In Progress
PHA-WIDE Management Improvements	Staff Training	1408	1	3,000.00		3,000.00	0.00	In Progress
	Computer Upgrades	1408	PHA-wide	10,000.00		10,000.00	6,426.68	In Progress
PHA-WIDE Administration	Employee Benefits	1410	1	7,800.00		7,800.00	5,562.50	In Progress
	Travel Expense	1410	1	3,000.00		3,000.00	0.00	In Progress
	Advertising	1410	1	2,000.00		2,000.00	0.00	In Progress

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
<b>PHA Name:</b> <b>Bristol Tennessee Housing and Redevelopment Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN37P06650106</b> Replacement Housing Factor Grant No:				<b>Federal FY of Grant:</b> <b>2006</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE	A/E Fees	1430	1	30,000.00		30,000.00	19,916.24	In Progress
Fees and Costs	PHA Agency Plan Update	1430	1	3,000.00		3,000.00	3,000.00	In Progress
	Consultant Fees for Environ. Review	1430	1	1,500.00		1,500.00	1,500.00	In Progress
	Management Fees	1430	1	10,000.00		10,000.00	0.00	In Progress
	Clerk-of-Works	1430	1	20,000.00		20,000.00	0.00	In Progress
PHA-WIDE	Ranges/Refrigerators	1465.1	PHA-wide	10,000.00		10,000.00	6,154.00	In Progress
Dwelling								
Equipment								
PHA-WIDE	Washers/Dryers	1475	PHA-wide	17,000.00		17,000.00	0.00	In Progress
Nondwelling								
Equipment								

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

<b>PHA Name:</b> <b>Bristol Tennessee Housing and Redevelopment Authority</b>			<b>Grant Type and Number</b> Capital Fund Program No: <b>TN37P06650106</b> Replacement Housing Factor No:			<b>Federal FY of Grant:</b> <b>2006</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TN066-002	07/17/08			07/17/10			
Edgemont Tower							
TN066-003	07/17/08			07/17/10			
Fort Shelby Tower							
PHA-WIDE Operations	07/17/08			07/17/10			
PHA-WIDE Management Improvements	07/17/08		06/30/07	07/17/10			
PHA-WIDE Administration	07/17/08		06/30/07	07/17/10			
PHA-WIDE Fees and Costs	07/17/08		06/30/07	07/17/10			
PHA-WIDE Dwelling Equipment	07/17/08		06/30/07	07/17/10			

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

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<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part I: Summary</b>					
<b>PHA Name:</b> <b>Bristol Tennessee Housing and Redevelopment Authority</b>		<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN37P06650105</b> Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2005</b>
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:    )					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <b>03/31/08</b> <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds	0.00		0.00	0.00
2	1406 Operations	81,700.00		81,700.00	81,700.00
3	1408 Management Improvements	81,700.00		81,700.00	81,700.00
4	1410 Administration	12,800.00	6,448.93	6,448.93	6,448.93
5	1411 Audit	0.00		0.00	0.00
6	1415 Liquidated Damages	0.00		0.00	0.00
7	1430 Fees and Costs	54,932.00	35,407.48	35,407.48	35,407.48
8	1440 Site Acquisition	0.00		0.00	0.00
9	1450 Site Improvement	0.00		0.00	0.00
10	1460 Dwelling Structures	0.00	167,406.87	167,406.87	167,406.87
11	1465.1 Dwelling Equipment—Nonexpendable	0.00		0.00	0.00
12	1470 Nondwelling Structures	142,371.00	0.00	0.00	0.00
13	1475 Nondwelling Equipment	35,000.00	35,839.72	35,839.72	35,839.72
14	1485 Demolition	0.00		0.00	0.00
15	1490 Replacement Reserve	0.00		0.00	0.00
16	1492 Moving to Work Demonstration	0.00		0.00	0.00
17	1495.1 Relocation Costs	0.00		0.00	0.00
18	1499 Development Activities	0.00		0.00	0.00
19	1501 Collateralization or Debt Service	0.00		0.00	0.00
20	1502 Contingency	0.00		0.00	0.00
21	Amount of Annual Grant: (sum of lines 2 – 20)	408,503.00		408,503.00	408,503.00
22	Amount of line 21 Related to LBP Activities	0.00		0.00	0.00

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part I: Summary**

<b>PHA Name:</b> Bristol Tennessee Housing and Redevelopment Authority		<b>Grant Type and Number</b> Capital Fund Program Grant No: TN37P06650105 Replacement Housing Factor Grant No:		<b>Federal FY of Grant:</b> 2005	
<input type="checkbox"/> Original Annual Statement		<input type="checkbox"/> Reserve for Disasters/ Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no: )	
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/08				<input type="checkbox"/> Final Performance and Evaluation Report	
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
23	Amount of line 21 Related to Section 504 compliance	0.00		0.00	0.00
24	Amount of line 21 Related to Security – Soft Costs	0.00		0.00	0.00
25	Amount of Line 21 Related to Security – Hard Costs	0.00		0.00	0.00
26	Amount of line 21 Related to Energy Conservation Measures	0.00		0.00	0.00



**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part II: Supporting Pages**

PHA Name: Bristol Tennessee Housing and Redevelopment Authority		Grant Type and Number Capital Fund Program Grant No: <b>TN37P06650105</b> Replacement Housing Factor Grant No:				Federal FY of Grant: <b>2005</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
TN066-001	Windows	1460	12 bldgs	0.00	167,406.87	167,406.87	167,406.87	Completed
Family Units								
TN066-002	Hallway Windows	1470	Dev-wide	0.00		0.00	0.00	Deleted
Edgemont Tower	Sewerline Replacement	1470	Dev-wide	112,371.00	0.00	0.00	0.00	Deleted
	Emergency Shelter	1470	Dev-wide	10,000.00	0.00	0.00	0.00	Deleted
	HVAC Replacement	1470	Dev-wide	10,000.00	0.00	0.00	0.00	Deleted
TN066-003	HVAC Replacement	1470	Dev-wide	10,000.00	0.00	0.00	0.00	Deleted
Fort Shelby Tower								
PHA-WIDE	Operating Expense	1406	1	81,700.00		81,700.00	81,700.00	Completed
Operations								
PHA-WIDE	Staff Training	1408	1	3,000.00		3,000.00	3,000.00	Completed
Management	Community Care Worker	1408	1	12,000.00		12,000.00	12,000.00	Completed
Improvements	Computer Upgrades	1408	PHA-wide	66,700.00		66,700.00	66,700.00	Completed

<b>Annual Statement/Performance and Evaluation Report</b> <b>Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)</b> <b>Part II: Supporting Pages</b>								
<b>PHA Name:</b> <b>Bristol Tennessee Housing and Redevelopment Authority</b>			<b>Grant Type and Number</b> Capital Fund Program Grant No: <b>TN37P06650105</b> Replacement Housing Factor Grant No:			<b>Federal FY of Grant:</b> <b>2005</b>		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-WIDE	Employee Benefits	1410	1	7,800.00	6,076.77	6,076.77	6,076.77	Completed
Administration	Travel Expense	1410	1	3,000.00	0.00	0.00	0.00	Deleted
	Advertising	1410	1	2,000.00	372.16	372.16	372.16	Completed
PHA-WIDE	A/E Fees	1430	1	30,000.00	9,621.30	9,621.30	9,621.30	Completed
Fees and Costs	PHA Agency Plan Update	1430	1	2,999.94	750.00	750.00	750.00	Completed
	Consultant Fees for Environ. Review	1430	1	1,200.00		1,200.00	1,200.00	Completed
	Management Fees	1430	1	732.06		732.06	732.06	Completed
	Contract Administrator/C.O.W.	1430	1	20,000.00	23,104.12	23,104.12	23,104.12	Completed
PHA-WIDE	Maintenance Vehicle	1475	1	35,000.00	35,839.72	35,839.72	35,839.72	Completed
Nondwelling								
Equipment								

**Annual Statement/Performance and Evaluation Report**  
**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)**  
**Part III: Implementation Schedule**

<b>PHA Name:</b> <b>Bristol Tennessee Housing and Redevelopment Authority</b>			<b>Grant Type and Number</b> Capital Fund Program No: <b>TN37P06650105</b> Replacement Housing Factor No:			<b>Federal FY of Grant:</b> <b>2005</b>	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
TN066-002	08/17/07		07/31/07	08/17/09		06/30/08	
Edgemont Tower							
TN066-003	08/17/07		07/31/07	08/17/09		06/30/08	
Fort Shelby Tower							
PHA-WIDE Operations	08/17/07		07/31/07	08/17/09		06/30/08	
PHA-WIDE Management Improvements	08/17/07		07/31/07	08/17/09		06/30/08	
PHA-WIDE Administration	08/17/07		07/31/07	08/17/09		06/30/08	
PHA-WIDE Fees and Costs	08/17/07		07/31/07	08/17/09		06/30/08	
PHA-WIDE Nondwelling Equipment	08/17/07		07/31/07	08/17/09		06/30/08	

**Optional Public Housing Asset Management Table****Not Applicable**

See Technical Guidance for instructions on the use of this table, including information to be provided.

**Public Housing Asset Management**

<b>Public Housing Asset Management</b>								
<b>Development Identification</b>		<b>Activity Description</b>						
Name, Number, and Location	Number and Type of units	Capital Fund Program Parts II and III <i>Component 7a</i>	Development Activities <i>Component 7b</i>	Demolition / disposition <i>Component 8</i>	Designated housing <i>Component 9</i>	Conversion <i>Component 10</i>	Home-ownership <i>Component 11a</i>	Other (describe) <i>Component 17</i>